

TRACY YOUTH ADVISORY COMMISSION YOUTH APPLICATION FORM

NΑ	NAME PH	PHONE EMAIL ADDRESS	
ΑĽ	ADDRESSEN		
Cľ	CITY ZIP		
	RADE (2024/2025 SCHOOL YEAR)		
ΡI	Please attach additional sheets if you need mor	e space to answer each question.	
1.	Have you been involved with any activities in the community? If so, please describe the activities and your role.		
2.	2. What qualities, skills, and resources would you	bring to the Youth Advisory Commission?	
3.	3. What areas of interest would you like the comm	ission to work on?	
4.	4. If available, please attach any additional informa	ation, including letters of recommendation.	

Teens who will be entering 9th-12th grade in 2024 are welcome to apply.

APPLICATION DEADLINE: April 26, 2024