

Starkville Mayor's Youth Council Application
****Incomplete applications will NOT be considered****

The purpose of the Mayor's Youth Council is to provide a voice for youth while organizing productive community projects, promoting youth engagement in government affairs, and acting as a resource for the City of Starkville, Oktibbeha County and community organizations.

Name _____ Date _____

Parent Phone # _____ Teen Phone Line _____

****Phone numbers are needed to schedule interviews. Please check for accuracy.**

Address _____

E-mail Address (Applicant) _____

E-mail Address (Parent) _____

School _____ Grade _____ Age _____

Why do you want to be involved in the Mayor's Youth Council?

**List organizations/clubs that you are currently a member and positions held.
(both school and non-school related)**

MANDATORY PARTICIPATION FOR MEMBERSHIP

1. An Induction Ceremony at City Hall
2. A team building retreat
3. 15 hours of community service
4. 2 SMYC meetings per month (1st and 3rd Mondays, 6pm)
5. Scholarship Project
6. 2 local governmental Board Meetings i.e. Okt. Co./Trustee/Mayor & Board

I agree to conduct myself as properly befitting a representative of The City of Starkville and Oktibbeha County and to abide by all guidelines of the Council. I realize that an appointment to this Council is **a ONE year commitment**. I affirm that I am able and willing to make such a commitment.

Student Signature: _____

I give my permission for the above named applicant to seek membership on the Starkville Mayor’s Youth Council and I have read and understand the commitments required for the Council.

Parent/Legal Guardian Signature: _____

Please complete application on line or

Return application by August 30 to:

City of Starkville
Starkville Mayor’s Youth Council
110 W. Main St.
Starkville, MS 39759

If you have any questions,

Please contact:

Mayor’s Office
662-323-2525, ext. 3100
smyc@cityofstarkville.org

ALL APPLICATIONS DUE BY AUGUST 30TH, 5:00 PM.

INCLUDE ONE LETTER OF RECOMMENDATION