

Niceville Youth Advisory Council Application

Name: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

School: \_\_\_\_\_

Grading entering in Fall Current Year \_\_\_\_\_ Current GPA: \_\_\_\_\_

Planned Class Schedule for fall:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

References- Please include e-mails:

1. \_\_\_\_\_
2. \_\_\_\_\_

Essay: Please explain, in your own words, what you can bring to the City of Niceville Youth Advisory Council. (Word Limit: 250 words)