



Youth Council Member Application

Public Information: *(The data in this box is public and, therefore, available to the public.)*

Name		County	
Home Address		City	ST Zip

What skills, training and experience do you possess for Youth Council membership? Include employment, education and/or related volunteer experience. Please attach a one to two page résumé.

Ramsey County is recruiting individuals to represent various categories. Applications will continue to be accepted for future vacancies as well. Please indicate below the category or categories you can represent on the Youth Council.

- | | |
|--|---|
| <input type="checkbox"/> Education: ___Secondary ___Post-Secondary | <input type="checkbox"/> Business (for profit) |
| <input type="checkbox"/> Former/Current Youth Participant | <input type="checkbox"/> Public Housing Authority |
| <input type="checkbox"/> Job Corps | <input type="checkbox"/> Parks & Recreation |
| <input type="checkbox"/> Juvenile Justice | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Elected Official |
| <input type="checkbox"/> Parent or Foster Parent of Eligible Youth (youth seeking assistance under Workforce Investment Act) | <input type="checkbox"/> Youth Serving Agency |
| | <input type="checkbox"/> Other |

Optional:

*In an attempt to ensure Council representation reflects the makeup of our community, knowledge of the following information is helpful. However, completion of this information is **voluntary**.*

- | | |
|--|--|
| <input type="checkbox"/> White (Caucasian) | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> Black | <input type="checkbox"/> Asian or Pacific Islander |
| <input type="checkbox"/> American Indian or Alaskan Eskimo | <input type="checkbox"/> Other: _____ |

- Male Female

- Disabled If special accommodations are needed, please specify:



Ramsey County Workforce Investment Board

Private Information: <i>(The data in this box is private.)</i>				
Name		Job Title		
Place of Employment			County	
Work Address		City	ST	Zip
Work Phone	Work Fax	Home Phone	Other Phone: <input type="checkbox"/> Home Fax <input type="checkbox"/> Cell	
Email Address				
Personal References				
(1)	Name			
	Address		City	ST Zip
	Work Phone (include area code)	Home Phone (include area code)		
(2)	Name			
	Address		City	ST Zip
	Work Phone (include area code)	Home Phone (include area code)		
What are your reasons for wanting to serve on the Youth Council?				

Mail or fax your Youth Council Membership Application to:

Ramsey County Workforce Investment Board
 2098 11th Avenue East
 North Saint Paul, MN 55109

Fax: 651-779-5646
 Phone: 651-779-5422

The information on this application will be used to evaluate and select members of the Youth Council. Applicants may refuse to supply the requested information. However, except for optional voluntary information, the failure to complete the application may result in it being discarded. This data may be reviewed and used by Ramsey County and Saint Paul city staff.

Thank you for your interest!

For Office Use Only

Commissioner District _____ Planning District _____ City Council Ward _____