Youth Assembly Representative application

Please complete application and additional information and fax or mail to:

the Northwest Arctic Borough

ATTN: Kristen Walker
P.O. Box 1110 Kotzebue, Alaska 99752
(907) 442-2500 Fax (907)442-2930 or (907)442-3740
www.nwabor.org kwalker@nwabor.org

Requirements:

• Between the ages of 16-21 yrs

• Complete application

• One personal letter of interest

• Two letters of recommendation
Youth Assembly 2011

Name: ___________________________ Date: ___________________________

Address: ___________________________

City/Village: ___________________________ Zip: ___________________________

Home Phone: ___________________________ MSG. Phone: ___________________________

Email Address: ___________________________

How long have you lived in the Northwest Arctic? ___________________________

School: ___________________________ Grade: ___________________________ Birth date: ___________________________

1) Why do you want to serve on the Assembly? (if you need to, please use a separate piece of paper)

2) Please list interests and extracurricular activities (i.e. hobbies, clubs, sports, organizations, positions held, ect.)

3) Are you willing to attend Assembly meetings once a Month? YES NO

***Please provide two letters of recommendation (non- immediate family) ***

& a short letter of INTEREST
I understand that if I am selected as a member of the Borough Assembly, I will need to attend monthly meetings, and participate in a manner that brings honor and respect to the Northwest Arctic, and its citizens.

Signature of Applicant  Date

I give permission for_________________________ to apply for the Assembly Youth Representative. If selected, I support him/her in attending meetings and functions related to the Northwest Arctic Borough Assembly.

Signature of Parent/Guardian  Date