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)442-2930or(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

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Youth Assembly 2011

Name:		Date:	
Addres	s:		
City/Village:		Zip:	
Home Phone:		MSG. Phon	e:
Email A	Address:		
How lo	ng have you lived in the No	orthwest Arctic?	
School	:	Grade:	Birth date:
1)	Why do you want to serve	on the Assembly? (if you need to, j	please use a separate piece of paper)
2)	Please list interests and ex positions held, ect.)	tracurricular activities (i.e. hobbies,	clubs, sports, organizations,
3)	Are you willing to attend A	Assembly meetings once a Month?	YES NO

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

& a short letter of INTEREST



Youth Assembly 2011

	honor and respect to the Northwest Arctic, and its
Signature of Applicant	Date
Signature of Applicant	Date
	to apply for the Assembly Youth Representative. If and functions related to the Northwest Arctic Borough
Signature of Parent/Guardian	Date