**FEDERATION YOUTH COUNCIL**

**NOMINATION FORM**

**PURPOSE**

The purpose of the Federation Youth Council is to provide a forum for young people to be represented and to be able to advocate their opinions, issues and concerns across the Federation area.

The Federation Youth Council provides a opportunity for young people to express their views, advise Council on youth-related issues, and help organise youth driven and focused events and activities.

**PROCESS**

Thank you for your interest in becoming a Federation Youth Councillor

* Nominations are invited for community committee positions
* Please read the Federation Youth Council Terms of Reference before submitting this form.
* Please note parent / guardian consent is required if applicant is under 18 years of age.

For verbal expression of interest, assistance in completing this form or if you wish to discuss your nomination, please contact the Community Development Team at Federation Council on (02) 6033 8999.

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| YOUR DETAILS |
| First Name  | Click or tap here to enter text. |
| Surname  | Click or tap here to enter text. |
| Postal Address |  |
| Town  | Click or tap here to enter text. | Post code | Click or tap here to enter text. |
| Phone  | Click or tap here to enter text. |
| Mobile  | Click or tap here to enter text. |
| Email Address  | Click or tap here to enter text. |

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| Thank you for considering being part of the Federation Youth Council. We ask that you please complete the following questions to support your application.  |

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| Date of Birth: | Click or tap here to enter text. |

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| Please indicate from the following statements which best describes your current situation: |
| Full Time Student |[ ]  Work Full Time  |[ ]
| Part Time Student  |[ ]  Work Part Time  |[ ]
| None of the Above |[ ]   |

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| What do you think are the issues of importance to young people in the Federation Council area? |
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| Why do you think you would make a good Youth Councillor? |
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| Tell us what ideas you have to make the Federation Council area a better place for young people to live and work. |
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| What type of leadership or personal skills would you like to develop through your time on the Federation Youth Council? |
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| **DECLARATION**I have read and understand the Miki City Advisory Committee Terms of Reference and agree to abide by these expectations |
| Name  | Click or tap here to enter text. |
| Signature  | Click or tap here to enter text. |
| Date  | Click or tap here to enter text. |

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| If under 18 years of age, this section must be signed by a parent or guardian who has responsibility for the young person. |
| **PARENT / GUARDIAN CONSENT** I give permission for my son/daughter to participate in the Federation Youth Council. |
| Your Name  | Click or tap here to enter text. |
| Signature  | Click or tap here to enter text. |
| Date  | Click or tap here to enter text. |

You can submit your completed nomination form in the following ways:

**Phone:**

Call Council on (02) 6033 8999 to verbally submit your form.

**Email:**

communityevents@federationcouncil.nsw.gov.au

Subject Line: Federation Youth Council Committee

**In person:**

At any Federation Council office.

**Post:**

Community Development Team

100 Edward Street

Corowa NSW 2646

**PRIVACY**

Federation Council acknowledges and respects the privacy of individuals. All information on this Nomination Form will be managed and stored according to the Privacy and Data Act 2014.