



PITTSYLVANIA COUNTY
VIRGINIA

PITTSYLVANIA COUNTY YOUTH COMMISSION

2016-2017 APPLICATION

GENERAL INFORMATION:

Name: _____ Home Phone: _____
Home Address: _____ Zip Code _____
School Attending Now & Grade: _____
School Attending 2014-2015 & Grade: _____
County Voting District: _____

- On a separate sheet of paper (1) list civic/service organizations/school club participation and other volunteer experience, and (2) list two references, other than a parent or relative, who can attest to your character and overall leadership abilities.
- Write an essay in response to this question: *“Why do you wish to be a member of the Pittsylvania County Youth Commission, and what would you hope to accomplish?”*
- Essay should be typed on 8 ½” X 11” paper, double-spaced, minimum 250 words, and should bear your full name and signature. Attach essay to this completed application form and mail or deliver so that all items are received by **June 15, 2016, at 5:00 p.m.**
- In addition to the two references named, please attach one letter of recommendation, in a sealed envelope, written by an adult who is familiar with your qualifications (not a parent or other relative). This should be typed, describing in 250 words or less why the author feels that you should be appointed to the Youth Commission. The letter must accompany this application and should include the author’s full name, address, daytime and evening phone numbers, signature, and a brief description of his/her relationship with you, the applicant.
- **Commitment Statement** (Signed by Applicant and Parent/Guardian): Appointment to the Youth Commission involves a commitment to consistent attendance at meetings and other activities. We have read the attached “Boards and Commission Information Sheet” regarding the purpose, structure and meeting requirements of the Pittsylvania County Youth Commission, and are willing to accept and commit to those standards should the applicant be selected as a member of the Youth Commission.

Student’s Signature: _____ Date: _____
Name of Parent or Guardian: _____
Signature of Parent or Guardian: _____
Address: _____
Home Phone: _____ Work Phone: _____

Please mail or hand-deliver this completed form, your essay, and the letter of recommendation to:

County Administrator’s Office
1 Center Street - P. O. Box 426 - Chatham, VA 24531