



WINSTON-SALEM YOUTH ADVISORY COUNCIL POSITION ACCEPTANCE FORM

Complete all areas below. Please return to the Human Relations Department by Friday, August 2, 2013.

PLEASE TYPE OR PRINT LEGIBLY IN INK.		
FIRST NAME: <u>Daelon</u>	LAST NAME: <u>Robinson</u>	BIRTHDATE: <u>12-29-97</u>
SCHOOL: <u>West Forsyth High</u>	GRADE: <u>10th</u>	
ADDRESS: <u>5487 Taylor's Run Dr</u>		
GENDER: <u>Male</u>	RACE: <u>Black</u>	
PHONE: <u>336-757-0874</u>	E-MAIL: <u>daerob58@yahoo.com</u>	
PARENT NAME: <u>Dedric and Pamela Robinson</u>		
PARENT PHONE: <u>336-792-7583 (DAD)</u> <u>336-692-7561 (MOM)</u>	PARENT E-MAIL: <u>gborobiny91@msn.com</u>	

As established by the City Council, the Youth Advisory Council's mission is to serve as a conduit between city government and their younger constituents. Their core focus includes youth civic engagement through community programming, youth-oriented activities, contributing at least 40 volunteer hours per school year to government-related initiatives, projects, and programs, providing information to the community regarding topics that are important and relevant to the youth in our community, and to advise the City Council and the Human Relations Department on matters that relate to the community's youth population.

FREE RESPONSE APPLICATION

1. List in order of importance to you up to five (5) school, volunteer, religious, social, athletic, and/or employment activities and organizations in which you participated in the last two (2) years.

<ol style="list-style-type: none"> 1. Crosby Scholars Program 2. West Forsyth High School Basketball Program (Freshman & JV Team) 3. B Phi B (Brother Phi Brother) Church Youth Program 4. West Forsyth High School Titan Achievers Program (Minority Outreach Program) 5. NC Ravens AAU Basketball Program
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2. Describe yourself in three words:

1). Honest 2) Determined 3). Ambitious
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3. What three issues concern you most in Winston-Salem?

<ul style="list-style-type: none"> • Job opportunities • Growing Health Concerns (diabetes, hypertension, heart disease, HIV) • Education (under performance of minorities in the public school system).



WINSTON-SALEM YOUTH COUNCIL ACTIVITIES

Each month, Youth Advisory Council members will examine a different community subject. Youth Advisory Council meetings are absolutely mandatory. Events related to monthly subjects will not be required, but Youth Advisory Council members will have to participate in a certain number of activities as required of their membership.

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|---------------------------------------|-------------------------------------|
| August 23, 2013 - Orientation | January 28, 2014 - Local Government |
| September 24 - Environment | February 25 - Human Relations |
| October 22 - Civic Engagement | March 25 - Nonprofit Community |
| November 26 - Interfaith | April 22 - Economic Development |
| December 17 - Hunger and Homelessness | May 27 - Student Chosen Subject |

Youth Advisory Council meeting dates and subjects for meetings are subject to change.

NAME: <u>PAMELA ROBINSON</u>	EMERGENCY CONTACT: <u>MOTHER</u>
RELATIONSHIP TO APPLICANT: <u>FATHER</u>	
HOME PHONE: <u>336-712-3367</u>	WORK/CELL PHONE: <u>336-692-7583</u>
	* (MOB) <u>336-692-7561</u>

STUDENT PLEDGE

I recognize the important responsibilities I am undertaking in serving as a member of the Youth Advisory Council and pledge to carry out in a trustworthy and diligent manner the duties and obligations in my role as a Youth Advisory Council member. I will commit to attending all meetings of the Council, unless my absence is excused because of an unavoidable conflict. I will respect the opinions of my peers who serve on the Youth Advisory Council and act for the good of the community.

Signature: *Dedric H. Robinson* Date: 7-30-13

WINSTON-SALEM YOUTH COUNCIL PARENTAL PERMISSION

Dear Parent/Legal Guardian:

By participating in the Youth Advisory Council, your child is making a commitment to take part in an outstanding program. This form is to verify that you are aware of the attendance policy and program requirements. Upon selection to participate, students are expected to attend all program activities. Please sign and return this form. The above dates and requirements are further detailed on the attached information sheet which you should keep for your reference. You are responsible for reading the information in full before signing this permission form.

I have read and understand the program requirements, including the attendance policy. My son/daughter has my support and permission to participate in the 2013-2014 Youth Advisory Council.

Signature: *Dedric H. Robinson* Date: 7-30-13

Return by mail, fax, or e-mail to:
 Winston-Salem Human Relations Department
 PO Box 2511
 Winston-Salem, NC 27102
 Fax: 336.748.3002 E-mail: jaymew@cityofws.org