

# Youth Council Application Form



Name:  Date of birth:

Address:

Postcode:

Phone number:

Email address:

Do you attend any youth groups or clubs? Yes  No

Name of group(s)/club(s):

If you are in education which school/college/training provider do you go to?

Which representative are you interested in being?

Area Representative:

Special Interest Representative:  (please state which group you would be representing)

Why do you want to be a youth councillor and what skills and qualities would you bring to this role?

I am available to attend meetings for the youth council on Wednesday evenings

Yes  No

**To submit:** Fill in the application form in Acrobat Reader and click the 'submit form' button to email an electronic copy directly to [youthcouncil@dudley.gov.uk](mailto:youthcouncil@dudley.gov.uk)

**SUBMIT FORM**