

The Catholic Community of St. Thomas More  
Youth Council 2008-2009

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Application

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

School \_\_\_\_\_ Grade 2008-2009 FR SO JR SR

Parents Name \_\_\_\_\_

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Have you ever served on Youth Council? Yes No JYM TYM

If yes, what is your favorite thing about YC? \_\_\_\_\_

If yes, what is your least favorite thing about YC? \_\_\_\_\_

I am interested in the following officer position: President Vice President Publicist

If currently a YC member, please indicate a few of the ways you have contributed to the YC this year

\_\_\_\_\_  
\_\_\_\_\_

What gifts & talents do you wish to share as a member of YC? \_\_\_\_\_

\_\_\_\_\_

In what other areas are you involved in STM parish life outside of youth ministry? \_\_\_\_\_

\_\_\_\_\_

YC meets approximately every other week on Sundays. Do you have any conflict with the meeting time? Yes No

If yes, please explain: \_\_\_\_\_

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Please provide the name, phone number, and e-mail of one adult who will serve as your reference. This adult may be a catechist, teacher or coach, family friend, Confirmation sponsor, etc. This person will be contacted by the Director of Youth Ministry, so please ask this person before submitting his/her name and inform them that he/she will be contacted during the next few weeks.

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

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Please read the following:

I have reviewed the responsibilities and expectations of Youth Council and hereby submit my application. I ask for consideration to be a member of YC, with the expectation that I will perform my duties to the best of my ability. I also understand that I am unable to do so, I may be asked to step down from my position, so that I do not jeopardize the efficiency and effectiveness of Youth Council as the leadership organization for youth ministry.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_