



Application Form – Horowhenua Youth Council – 2012

1. Full Name
2. Address.....
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3. Birthday.....
4. Contact numbers
(Home).....
(Mobile phone).....
5. Email.....
6. Occupation
7. School (if still a student).....
8. Iwi affiliations.....
9. Why do you want to join Youth Council?
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10. What special skills do you think you can bring to the Youth Council?
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Please Return to Horowhenua District Council by 13 February 2012

Email: coletteb@horowhenua.govt.nz

Or drop into Horowhenua District Council buildings, 126 – 148 Oxford Street, Levin.

11. In your opinion, what is the biggest issue facing youth in the Horowhenua District today?

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12. What would be the perfect solution for this problem and how do you think this could be achieved?

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13. What other commitments do you have? I.e. – sport, other groups. How often do they meet?.....

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14. Can you commit to monthly meetings for the next twelve months? (Absences will only be permitted for valid reasons such as illness, work clashes, exams, family reasons etc.) If not, why not?

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15. Is there anything else you would like to say which may assist your application and the recruiting process?

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Thank you for taking the time to apply to be on the Horowhenua Youth Voice Council. We will be in touch soon about the status of your application.

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