



## ECWR Youth Advisory Council Application

Student Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Grade in School: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Email: \_\_\_\_\_ Parent's Phone Number: \_\_\_\_\_

**Please answer the following questions through written response or through video:**

Why would you like to be a part of the Youth Advisory Council at ECWR? \_\_\_\_\_

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What does leadership mean to you? \_\_\_\_\_

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Have you participated in other leadership/volunteer activities before? If yes, what were they? \_\_\_\_\_

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What are your interests, talents, hobbies, or extracurricular activities? \_\_\_\_\_

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Is there anything else you would like to share with the Youth Advisory Council mentors? \_\_\_\_\_

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To submit completed applications or if you have any questions, please reach out to Emma by emailing [Emma@EmeraldCoastWildlifeRefuge.org](mailto:Emma@EmeraldCoastWildlifeRefuge.org). If video files are too large to submit via email, you can also send a link to a google drive file or YouTube video.