

SYRACUSE YOUTH CITY COUNCIL INFORMATION

“The mission of the Syracuse Youth City Council is to provide an opportunity for youth to develop mature citizenship, leadership, a sense of personal achievement, and an understanding of government.”

The Youth Council will serve Syracuse City by planning and implementing social, educational, cultural, recreational and other activities for the youth and community. They will be working with the Mayor, City Council, City Department Heads, Schools, Civic Clubs, Senior Citizens and other Service Organizations to provide service and leadership opportunities for the youth of the city.

QUALIFICATIONS TO SERVE ON THE SYRACUSE YOUTH CITY COUNCIL:

1. Must be a resident of Syracuse City.
2. Attend the 8th, 9th, 10th, 11th, or 12th grade in the upcoming school year.
3. To be Mayor or Mayor Pro Tem of the Youth Council you must be in 12th grade.

REQUIREMENTS TO REMAIN ON THE YOUTH CITY COUNCIL:

1. Attend 80% of all Youth Council meetings and activities held.
2. Maintain a 2.5 GPA in school.
3. Fulfill the responsibilities of the office held.
4. Set a proper example for the youth of the community.

DUTIES AND RESPONSIBILITIES OF THE YOUTH CITY COUNCIL:

1. Meet twice monthly to conduct business and any additional days planned for activities.
2. Pass motions and resolutions as necessary by a majority vote of the Youth Council.
3. Plan and carry out activities for the youth of the community, coordinating all activities with the Youth Council Advisors and the City Council Member assigned to the Youth Council.

A Youth Council member can be removed from office upon violation of one or more of the above criteria and by a majority vote of the Youth Council with the final approval of the SYCC Advisor. Youth Council terms will be June 1st through May 31st each year. Any Youth Council member who wants to remain on the Youth Council must reapply.

By filling out the Youth Council Application form and signing it, you agree that you have read and understand the requirements of the Youth Council and are applying for membership in the Syracuse Youth City Council.

Syracuse City ♦ c/o Syracuse Youth City Council ♦ 1787 South 2000 West ♦ Syracuse, UT 84075

Syracuse Youth City Council Application

Name _____

Address _____

Telephone# _____

Birth Date _____ Age _____ Grade _____ GPA _____

Parent/Guardian Name _____

Address (if different) _____

Telephone#(s) Home _____ Work/Cell _____

In case of Emergency Notify _____

Telephone#(s) _____ Relationship _____

Hobbies/Interests: _____

Why do you want to be a member of the Youth Council? _____

What do you have to offer the Youth Council? _____

Are you currently involved in extra curricular activities (clubs, sports, school officer, cheerleaders, church, civic, etc.)? _____ Please list.

Have you previously been on a Youth Council? _____ If so, for what city and what position did you hold? _____

Applicant Signature _____ Date _____

Parent Signature _____ Date _____

Please return application and two letters of recommendation- from one parent and one non-related adult (i.e. church leader, neighbor, school teacher) to the City Hall. For information, call SYCC Advisors- Sydney Hawkes at 776-0677 or Julie Robertson at 776-4999.