City of New Haven Mayor's Youth Leadership Council Application



The mission of the City of New Haven Mayor's Youth Leadership Council (MYLC) is to serve the community and provide a voice for the young people. MYLC's goal is to bridge the gap between the youth of New Haven and the Mayor's Office, City Officials and other City stakeholders through the organization of constructive community impact projects, events and activities, and the promotion of youth activism as a contribution to the City of New Haven's civic affairs. The MYLC also works to raise awareness for youth-related issues in the City.

Attendance is critical to the overall objectives of the Mayor's Youth Leadership Council. If selected, you must adhere to the Attendance Policy* and may have no more than three (3) excused absences during the current term. Three (3) consecutive unexcused absences will result in loss of membership. All selected members are expected to adhere to the Code of Conduct* and to display outstanding personal character.

I have read the MYLC's guidelines, Code of Conduct and By-laws* and I understand the commitment for the City of New Haven Mayor's Youth Leadership Council. I also realize the importance of teamwork and cooperation and I am willing to make this commitment.

*MYLC's Guidelines, Code of Conduct and By-laws can be found on the City of New Haven's website under Programs and Initiatives within the Youth and Recreation page at <u>www.cityofnewhaven.gov</u> or obtained from the Office of Youth and Recreation.

If you are interested in applying for membership to the MYLC, please, complete, sign, date and submit the following application and required forms and return the same in one envelope to:

Office of the Mayor Youth and Recreation Department Attn: Tenaiya Baker, Coordinator for Youth@Work Ernie Cloman, Youth Service Bureau Manager 165 Church St. New Haven, CT 06510

Alternatively, you may scan and email your completed application and required forms to <u>tbaker@newhavenct.gov</u> and <u>ecloman@newhavenct.gov</u>.

Applicant Qualifications

- 1. Must be a New Haven resident between the ages of 14-19.
- 2. Must be in high school, college or vocational program.

Application Requirements

- 1. Complete, sign and date the application. Please type or print clearly in black or blue ink. You may attach additional sheets if necessary.
- 2. Complete, sign and date MYLC required forms:
 - a. Recommendation forms
 - b. Parental/Legal Guardian signature of consent if under the age of 18. (on signature page of application)
 - c. Release of Information form if 18 years of age or older
 - d. Copy of current school schedule/transcript/report card
- 3. Please, no staples, no double-sided pages

I. Personal Information

Name:	
Street Address:	
City and State: New Haven, CT	Zip Code
Age: DOB (mm/dd/yyyy)):
Gender: Male Female Non-Binary	yTransgenderIntersex
I prefer not to answer	
Race or Ethnic Group:AsianBlack/African European Hispanic/Latino Middle Other	American CaribbeanCaucasian/White e EasternNative AmericanPacific Islander
School:	
Grade (2023-2024 School Year):	Graduation Year:
Home Phone:	Cell Phone:
Email Address	Instagram Acct:
Parent/Guardian Information	
Name:	
Work #: Ce	ll #:
Email Address:	
Emergency Contact Information	
1. Name:	Phone:
Relationship to Applicant:	
2. Name:	Phone:
Relationship to Applicant:	

Activities

- 1. Please list school, community groups, non-profit and community organizations you have volunteered at in the past two years.
- 2. Please list activities you will be involved in during the current school year. Please include employment, internships, fellowships, sports, volunteer work, after-school academic enrichment programs, etc.

II. Questions

1. How did you learn about the MYLC? (please answer all questions in a minimum of 100 words)

2. What are three (3) important issues to you concerning your community? What are three (3) important issues you may have discussed with your friends/classmates concerning your community? *(please answer all questions in a minimum of 100 words)*

3. Please, give an explanation of how you believe members of the MYLC, other high school students, City agencies and other stakeholders can collaborate effectively to address one of the issues you listed in question in two (2). *(please answer all questions in a minimum of 100 words)*

4. What skills, talents or expertise do you possess that would make you a good fit for the MYLC? (check all that apply)

Research Public Speaking	Managing Social Media Public Advocacy	Web Design Facilitating Meetings
Student Recruitment Persuasive Writing Graphic Arts	Community Activism PowerPoint Presentations Mentoring	Community Organizing Lobbying Presentations
Videotaping/Editing Business Etiquette	Grant Writing Written Communication	Budget Review Photography

- 5. What personal goals would you like to achieve as a member of the MYLC? (*Please answer in 100 words or less*)
- 6. What leadership skills would like to develop as a member of the MYLC? (check all that apply)
 - ____Responsibility Team Building Professional Decorum Public Speaking Public Advocacy ____ Facilitating Meetings Decision Making ____ Community Organizing ____ Time Management Lobbying Conflict Resolution Networking Mentorship Presentations <u>Collaborating</u> Grant Writing Budget Review Oral communication Written Communication Other:
- 7. What MYLC Committee would you like to serve on? Please number in order of preference from one (1) through six (6), with one (1) being the most preferred)
 - ____ Civic Engagement and Leadership
 - ____ Education
 - ____ Internship
 - ____ Public Health
 - _____ Social Justice and Racial Equality
 - ____Arts, Culture and Community Leadership

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III. Associations

Are you related to a City Official (Appointed or Elected) or City of New Haven employee or member of a City Board or Commission? _____yes

	or <u>no</u> no	
If yes, Name of associate and relationship:		
, , , ,		_

Department/Board/Commission and Position/Title:_____

Please write your initials next to the following sections to indicate that you have read and understand its contents.

IV. Demographics

The City of New Haven does not discriminate based on race, ethnicity, sex, creed, national origin or disability. The requested information is to help facilitate the City New Haven's goal of assembling a diverse group young people. Omitting this information will affect your application.

V. Registrant Attestation and Release

I certify that the statements made by me on this application are voluntary, true and correct to the best of my knowledge and belief and are made in good faith. I understand that the information I have provided is subject to review and verification. If I knowingly make any misstatement(s) of fact(s), I am subject to disqualification or dismissal and to such other penalties as may be prescribed by the City of New Haven Youth and Recreation Department.

VI. Code of Conduct Statement

If selected to the program, I understand and agree to adhere to the rules of the program and conduct myself responsibly and respectfully at all times. While at participating, I agree to 1.) Report to meetings on time; 2.) Refrain from the use of profanity or foul language; 3.) Refrain from any aggressive or violent behavior, threats of violence, weapon possession or sexual harassment; 4.) Wear appropriate clothing (*i.e., no excessive jewelry, revealing clothing, do-rags/ bandanas and/or any other clothing deemed unacceptable by my worksite supervisor*); 5.) Refrain from the use, purchase or possession of any drugs or alcohol; 6.) Refrain from theft or possession of any stolen property; 7.) Refrain from any discriminatory behavior towards another individual based on race/ethnicity, economics, disability, religion or sexual preference.

VII. Civil Rights Law

This information is requested solely for the purpose of determining compliance with Federal civil rights law and your response will not affect consideration of your Registration. By providing this information, you will assist in assuring that this program is administered in a non-discriminatory manner. The Mayor's Youth Leadership Council is an equal opportunity employer/program and auxiliary aids and services are available upon request.

VIII. MEDIA RELEASE FORM

I hereby grant permission to the City of New Haven's Mayor's Youth Leadership Council, its affiliates and their successors, and any person receiving permission from any of them, to use my picture, likeness, name, photograph or voice, at its discretion in publications or on video or audio tape concerning education programs or activities of the City of New Haven's Mayor's Youth Leadership Council. I have been assured, and it is my understanding, that this shall be used in instructional or publicity contexts only and shall not be used for any commercial purposes whatsoever. I do hereby agree to hold harmless the City of New Haven's Mayor's Youth Leadership Council in connection with any and all claims regarding my child's photographic image, including legal fees and other costs incurred. I do hereby waive any claim for compensation for my child's photographic image. I do hereby agree that this RELEASE is valid until expressly revoked by me in writing.

Applicant Signature

Parent/Guardian Name (please print)

Parent/Guardian Signature (if under the age of 18)

Date

Contact Phone Number

Date



CITY OF NEW HAVEN DEPARTMENT OF HUMAN RESOURCES CITY OF NEW HAVEN

200 Orange Street, New Haven, CT 06510 (203) 946-8252 (203) 946-7166 fax www.newhavenct.gov



STEPHEN J. LIBRANDI MANAGER OF HUMAN RESOURCES AND BENEFITS

RELEASE OF INFORMATION

Print Last Name	Print First Name		Print Middle Initial
Thin Last Name	FILLFISTNALE		F fint Middle finitar
Social Security Number			Date of Birth
Address	City	State	Zip Code

I expressly authorize the City of New Haven to contact any of my prior employers or references listed on my City of New Haven Application for Employment (the "Application"), to conduct other background checks necessary for the purpose of verifying all information provided on the Application.

I understand that previous conviction is not necessarily disqualifying and expressly authorize the City of New Haven to conduct a background check of my criminal history, if any. I also agree to execute as a condition of employment or continued employment any additional written authorizations necessary for the City of New Haven to obtain access to and copies of records pertaining to this information.

I understand that should the City of New Haven decide to retract a conditional offer of employment based on a background check of my criminal history, I will have the opportunity to rebut said decision by providing written information concerning the circumstances and events relating to any criminal conviction. Information provided should relate to those factors significant to the City's decision making, which are set forth in Section 2-852(d) of the New Haven Code of Ordinances, a copy of which is available upon request.

With regards to the foregoing disclosures, I expressly agree to release all of those prior employers, the City of New Haven, and any other person, company or entity from any cause of action or from any liability that may arise from supplying the City of New Haven with information it may request pursuant to this Release. I understand that any false answers or statements, or misrepresentations by omission, made by me on the Application or any related document may be sufficient for rejection of my Application or for my immediate discharge should such falsifications or misrepresentations be discovered after I am employed.

Applicant's Signature

Date

Position Applied For

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Department