



# The City of South San Francisco

Office of the City Clerk  
400 Grand Avenue  
South San Francisco, CA 94080  
(650) 877-8518

## YOUTH COMMISSION APPLICATION

### APPLICANT INFORMATION

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
*Last First (MM/DD/YYYY)*

Address: \_\_\_\_\_  
*Street Address District*

\_\_\_\_\_ *City State ZIP Code*

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

### SCHOOL INFORMATION

Please Select Grade:	Please Select School:
9 <sup>th</sup> Grade Freshman	Baden High School
10 <sup>th</sup> Grade Sophomore	El Camino High School
11 <sup>th</sup> Grade Junior	South San Francisco High School
12 <sup>th</sup> Grade Senior	College: _____
Other: _____	Other: _____

### SUPPLEMENTAL QUESTIONNAIRE

Why do you want to serve on the Youth Commission? Why do you believe the Youth Commission is important?



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## SUPPLEMENTAL QUESTIONNAIRE

Please list school and community activities or service organizations in which you are involved in.

The Youth Commission addresses issues affecting youth and the community through making recommendations to City Council. Please explain what you believe is the biggest issue concerning youth in South San Francisco today.

Can you commit to attending 6:30 p.m. meetings on the third Monday of each month?  YES  NO

If no, please explain: \_\_\_\_\_



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## DISCLAIMER AND SIGNATURE

Applicant  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

*I certify that, to the best of my knowledge, all statements in this application are complete and true. I agree and understand that any mis-statement of material fact will cause me to forfeit all rights to appointment to a Commission, Board, or Committee with the City of South San Francisco.*

*Applications are accepted on a continuous basis and will remain valid 1 year from the date of submission.*

### OFFICIAL USE ONLY

Submission Date:	Received By:
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