



## Congressman Ed Perlmutter's Youth Advisory Council Application

- Only complete applications will be considered.
- To be eligible, applicants must be enrolled in 9th, 10th, 11th, or 12th grade and **reside** in the Seventh Congressional District of Colorado. If you are unsure whether you live in the Seventh District, please visit [www.house.gov](http://www.house.gov) and use the "Find Your Representative" tool in the upper right corner to verify the district of your home address.
- The Congressman Perlmutter Youth Advisory Council consists of four separate meetings, two in each academic semester. If accepted into the program, you must be able to attend these meetings. There will be two meetings on Saturdays in the fall with the dates being scheduled this summer. Spring meeting dates will be announced at the end of this calendar year. \*Note: All meeting dates are subject to possible changes in the Congressional calendar.

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*\*\*Please print or type all of the requested information. Attach additional sheets if necessary.*

Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_

ZIP: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Secondary Email: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ *If over 18, are you a registered voter?* Yes No

Have you applied to serve on a Youth Advisory Council in the past? Yes No

*If yes, when did you apply?* \_\_\_\_\_

Have you served on a Youth Advisory Council in the past? Yes No

*If yes, when?* \_\_\_\_\_

School: \_\_\_\_\_

List all clubs and activities, including any leadership positions:

If selected, what topics would you like to discuss at Youth Advisory Council meetings?

What speaker(s) would you like to hear from?

Do you have any relatives who are federal, state or city employees, members of a city council, or serve on any board or commission? *(If yes, please list.)*

### Additional Requirements

Please attach the following required documents to your application:

- ✓ A 250-word essay. Briefly tell us about yourself, discussing your interests, goals for the future, what you hope to achieve if chosen for Youth Advisory Council, etc.
- ✓ A current photo of yourself *(for identification purposes only)*.
- ✓ **Two** letters of recommendation from individuals who can account for your character and interest in government. These letters should not be written by immediate family members.

*I certify that the information on this application and any additional material submitted is true and complete to the best of my knowledge. I have reviewed the fall meeting dates and am able to attend both meetings at this time.*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*I do hereby give my consent for my child to participate in the Congressional Youth Advisory Council and understand the time commitment involved for this program.*

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<p>Your <b>complete</b> application must be sent to Hannah Mullen in the Lakewood office no later than <b>September 20</b>.</p> <p>If you have questions about the application or general inquiries regarding Youth Advisory Council, please contact Hannah Mullen in our Lakewood Office at 303.274.7944.</p>	<p><b>Submit your application to:</b></p> <p>U.S. Congressman Ed Perlmutter 12600 West Colfax Ave Suite B-400 Lakewood, CO 80215</p>
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