

Education and Youth Advisory Board Student Representative Packet

What is the Education and Youth Advisory Board?

Mission and Purpose:

The Education and Youth Advisory Board shall build a strong community partnership and educational opportunities for the students in the schools located within the jurisdictional boundaries for the City of Westlake in efforts to promote and facilitate success among the students enrolled.

- 1. Serve as a student liaison between the City of Westlake, the Palm Beach County School District (the "School District"), and all public and charter schools which are located within the City in efforts to contribute, improve and enhance communication between all parties.
- 2. To promote and provide a student perspective towards public awareness of activities, programs, opportunities, and initiatives of public and charter schools located within the City.
- 3. To recognize and promote accomplishments of students, administrators, public schools and charter schools located within the City.

Meetings:

TBD. Meetings will generally be held as needed on the second Thursday at 6:30 PM. Meeting dates and times are subject to change.

What Do We Look for In A Student Representative?

Grade level: Sophomore/Junior

The Student Representative is enthusiastic about sharing their ideas and are committed to volunteering and participating with the Board. Have an interest in government, leadership and civic engagement.

Ability to participate in meetings in-person or virtually.

Education and Youth Advisory Board Student Representative Checklist:

- 1. Complete the Education and Youth Advisory Student Representative Application and Acknowledgment Form.
- 2. Attach Resume
- 3. Mail or email the application, Acknowledgement form and a resume to the Deputy City Clerk, Jomekeyia McNeil: <u>Jmcneil@westlakegov.com</u> or by mail: City of Westlake, City Clerk's Office 4001 Seminole Pratt Whitney Road, Westlake, Florida 33470.

Upon the submission of your completed application, it will be forwarded for review to the Education and Youth Advisory Board.



Education and Youth Advisory Student Representative Application

| DATE: | 2/22/2021 | | NAME | NAME: | | lindsay ogden | |
|--|---|------------------------------|--------------------------------|------------------------|---------------------------|---------------------------------------|--|
| PHONE: 561-312- | | 2-9145 | E-MA | IL: | li | lindsayo129@yahoo.com | |
| Your Grade in 2021/2022: | | 11th | GPA: | 4.67 | Do you | ou reside in the City of Westlake? no | |
| Are your currently | y involved i | n any you | th organiza | tions, c | lubs, or a | ctivities? If | so, please list. |
| I am affiliated wit school I am apart | th the Lake L of the Dance | ytal Softbal Marathon | ll program, be Leadership T | efore pre 'eam, Stu | viously be dent Gove | ing engaged rnment, Vars | with the Acreage Athletic League. At my ity Softball, and Go Green Club |
| Why do you wan | t to volunte | er with the | e Education | and Yo | outh and A | Advisory B | oard? |
| | n student that | would like | to help in m | y best wa | ay possible | . I would als | outside of school. I am a very o like a better understanding of how ective to the table. |
| What can you con | ntribute to t | he Educat | ion and Yo | uth Adv | visory Boa | ard? | |
| allows me to comm | unicate with | many of my | y peers, inclu | iding add | ressing wa | nts, issues, c | , I have a diverse background that oncerns, etc. Also, I am a very active gether through the internet. |
| What qualities do | you posses | ss ?(e.g., l | leadership) | | | | |
| since elementary se | chool has tau , but not let n | ght me alm | ost all qualiti | es as a p | erson that l | currently p | d being involved in extracurriculars ossess. I am someone who can charge in order to see things |
| List extracurricula | ar activities | , your role | e, and your | favorite | accompl | ishments in | each: |
| our rival team. Also bring together stude | , I am a co-ov nts for campu surer for my S | verall of the is cleanups | e "Ĝo Green (and making t | Club" at them real | our school lize how ou | and my favo at of shape of | important season opening game against rite accomplishment is being able to ur courtyards were due to garbage. I taking home first place in our school |
| Parent/Guardiar | n Name: | Londa Og | gden | | | Phone: | 561-315-0119 |
| Address: | | 17391 64 | th Place Nort | th, Loxal | natchee, Flo | orida | |
| Parent/Guardiar | n Email: | Lonmerm | naid@bellsou | l@bellsouth.net | | | |

This application, with the Acknowledgement form and resume may be e-emailed to the Deputy City Clerk, Jomekeyia McNeil: <u>Jmcneil@westlakegov.com</u> or by mail: City of Westlake, City Clerk's Office 4001 Seminole Pratt Whitney Road, Westlake, Florida 33470.



Education and Youth Advisory Board Acknowledgment Form

Please initial next to each requirement indicating that you have read and agreed to our policies.

| n |
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| |

yes Will show respect to everyone with whom I work.

Will complete assigned tasks to the best of my abilities for the Education and Youth Advisory Board.

Will be enthusiastic about volunteering and conduct myself in a professional manner.

Failure to comply will result in removal from the Education and Youth Advisory Board.

I certify that all statements in this application are true and complete to the best of my knowledge. I understand that any false statements will subject me to disqualification or dismissal. I have read and initialed each item in the Board Member acknowledgment and agree to adhere to these policies. I am aware that being a representative of the Education and Youth Advisory Board requires a commitment to participate in a monthly meeting to be held starting at 6:30pm or thereafter.

Printed Name ______LINDSAY OGDEN

Applicant/Youth Representative Lindsay Ogden Date: 2/22/2021

For Parent/Guardian: As the legal guardian of the participant of the Education and Youth Advisory Board, I also adhere to these policies. I understand that my teen is expected to attend all meetings and is responsible for any additional hours for which they agree to work. As their guardian, I agree to ensure that they are able to participate in meetings.

Printed Name ______LONDA OGDEN

Parent/Guardian Signature: _____londa haycock-ogden _____ Date: _____2/22/2021



Education and Youth Advisory Board Acknowledgment Form

Media Release

Parental consent for release of student photograph and information: I hereby give permission for the Education and Youth Advisory Board, City to use my child's photograph, video image, writing, voice recording, name, grade level, school name, to web sites, social media sites, etc. and/or similar Education and Youth Advisory Board, or similar City sponsored publications in the City approved news media interviews, releases, articles, and photographs.

yes **YES**, I give permission **NO**, I do not give permission

Printed Name _____LINDSAY OGDEN

Parent/Guardian Signature: _____londa haycock-ogden

_____ **Date:** _____2/22/2021