

# yoco

FORT PIERCE YOUTH COUNCIL

## APPLICATION FOR THE CITY OF FORT PIERCE YOUTH COUNCIL

\*Please print neatly in blue or black ink.

Name Jennifer Barajas Date 8/11/2021  
Parent's Name(s) Olga Medina Bulmaro Barajas  
Home Phone # 772-9475-6558 Other Phone Line 772-332-9824  
Address 201 S Indian River Dr City Fort Pierce State FL Zip 34950  
E-mail Address JenniferBarajas1016@gmail.com  
School Name: LPA Grade: 12<sup>th</sup> Age: 17  
Grade Point Average: 3.4

List the extra-curricular activities that you currently take part in:

Golf at LPA, Barras Dance company - hiphop/tap  
Girl Scout - Troop 40718

List any other organizations or clubs you are currently a member of:

Girl Scouts  
Recycling Club - LPA

Why do you want to be involved in the City of Fort Pierce Youth Council?

I like to take part in opportunities where I can use my voice and be heard. Also where I can make an impact on issues that matter.

Describe your ideas and goals for this Council and how they can benefit the Community.

As someone who was born and raised in Fort Pierce I would benefit the committee because I want nothing more but to make the city that I have grown up in a place that is safe, diverse and full of inspiration.

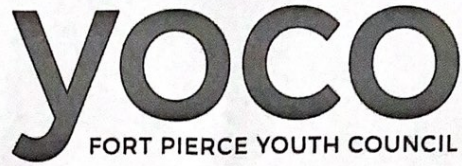
If you could change one thing about this City, what would that be and why?

I would like to see more recycling ideas, getting the youth more involved in city events.

What are you passionate about?

I am passionate helping others and my community. I am also very passionate about expressing my creativity.

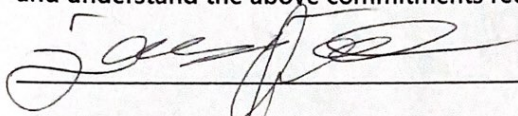
Please Return to: The City of Fort Pierce, City Manager's office: 100 N. US Highway 1, Fort Pierce, FL 34950 or for more info, please call 772-465-4170 or email at [citymanagersoffice@cityoffortpierce.com](mailto:citymanagersoffice@cityoffortpierce.com)



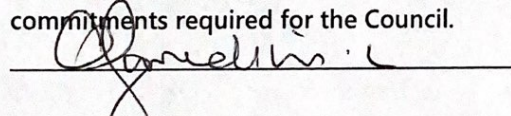
APPLICATION FOR THE CITY OF FORT PIERCE YOUTH COUNCIL pt2.

Commitment Statement: I understand that being a member of the City of Fort Pierce Youth Council carries certain responsibilities. I agree to conduct myself as properly befitting a representative of my City and abide by all guidelines of the Council. I understand that four or more consecutive absences from Youth Council meetings is grounds for dismissal.

\*Please see the attached List of Offices and Duties document. Student Signature: I have read and understand the above commitments required for the Council.

 Student Signature 8/11/2021 Date

Parent/Legal Guardian Signature: I give my permission for the above named applicant to seek a position on the City of Fort Pierce Youth Council and I have read and understand the commitments required for the Council.

 Parent Signature 8/11/2021 Date

\*Completing this application does not guarantee a seat on the Youth Council. If you have any questions please call 772-465-4170 or email at [citymanagersoffice@cityoffortpierces.com](mailto:citymanagersoffice@cityoffortpierces.com)