

APPLICATION FOR THE CITY OF FORT PIERCE YOUTH COUNCIL

\*Please print neatly in blue or black ink.

Name Cody Ingram Date 06/09/23
Parent's Name(s) Stephanie Porter
Home Phone # 407 8601900 Other Phone Line
Address 2601 New York Ave Fort Pierce State FL Zip 34946
E-mail Address CodyOCP7@gmail.com
School Name: FPC Grade: 9th Age: 14
Grade Point Average: 3.5

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

bpc basketball, Keystone, SFE Basketball (travel team)

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

Grade 9 recess + bpc

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

Because I want to give to the community that help me be a better man

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

To have better outreach in the community

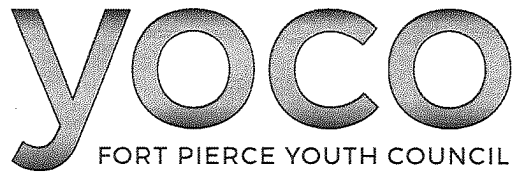
If you could change one thing about this City, what would that be and why?

The drug addiction

What are you passionate about?

being an athlete & my lord Jesus Christ


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



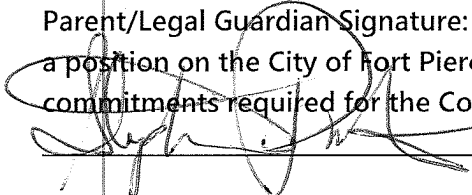
APPLICATION FOR THE CITY OF FORT PIERCE YOUTH COUNCIL pt2.

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 06/09/23 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 06/21/23 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)