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**Online Form Submittal: Fort Pierce Youth Council Application**

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**From** noreply@civicplus.com <noreply@civicplus.com>

**Date** Sun 7/13/2025 6:45 PM

**To** Audria Moore <amoore@cityoffortpierce.com>

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## Fort Pierce Youth Council Application

**\* indicates required information**

**Please download and complete the Required Signatures Form and submit with your application:** [Required Signatures Form](#)

**For assistance with this application, please contact Audria Moore at 772-467-3184 or [amoore@cityoffortpierce.com](mailto:amoore@cityoffortpierce.com).**

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### STUDENT INFORMATION

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First Name	Marcos
Last Name	Vaughn
Address1	4394 Gator Trace Lane
Address2	<i>Field not completed.</i>
City	Fort Pierce
State	FL
Zip	34982
Email Address	marcos.vaughn9@gmail.com
Cell Phone Number	7725778167
Home Phone Number	<i>Field not completed.</i>
School	Fort Pierce Central High School

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Grade Level	11
Grade Point Average	3.9
Age	16
Please list, in order of importance to you, up to four (4) school, volunteer, social, community, athletic, or other activities or organizations that you are currently participating in during your school term thus far.	National Honor Society Kiwanis Club Beta Club
Currently employed?	No
How many hours per week do you work?	<i>Field not completed.</i>
What three (3) social issues that affect the lives of Fort Pierce youth concern you most?	Cyber Bullying Social Media Mental Health
What specific measures would you take to address one or more of the issues listed above?	Start a page or group to do the following: <ul style="list-style-type: none"> <li>• Boost positivity throughout the community</li> <li>• Organize events to increase reach and engagement</li> <li>• Develop School Takeover days where we go into schools and have experts interact/engage with the students</li> </ul>
What is it about the Fort Pierce Youth Council that interests you?	It will give me an opportunity to give people who think, feel, and look like me to have a voice and representation on the Council.
<b>PARENT/GUARDIAN INFORMATION</b>	
First Name	Marc
Last Name	Vaughn
Email Address	marc.vaughn8@gmail.com
Cell Phone Number	3055099118
Attach Required Signatures Form	<a href="#">Scan Jul 13, 2025.pdf</a>
Download Required Signatures Form	<a href="#">Required Signatures Form</a>
Attach other supporting documents	<i>Field not completed.</i>

**For assistance, please contact Audria Moore:**

<i>Email:</i>	<i>amoore@cityoffortpierce.com</i>
<i>Phone:</i>	<i>(772) 467-3184</i>

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