





# CITY COUNCIL'S YOUTH ADVISORY COMMITTEE


## BOARD DETAILS




**OVERVIEW**



**SIZE** 26 Seats



**TERM LENGTH** 2 Years



**TERM LIMIT** 2 Years

The City Council's Youth Advisory Committee assists and advises the City Council on city youth issues; conducts surveys and determines the concerns and interests of the youth of Corpus Christi; encourages youth leadership and responsibility through volunteerism and community involvement; creates opportunities for public discussion of youth issues through meetings, workshops and conferences; looks for ways to promote understanding, respect and community involvement among youth groups of all cultures and backgrounds and assists in planning, recommending and implementing youth activities.



### DETAILS

#### COMPOSITION

Thirteen (13) primary members and thirteen (13) alternates selected by the principal or the principal's designee of their respective campuses and ratified by the City Council. The members shall be composed of students in grades 11 or 12 that are City residents. Terms are for two (2) years, however, each member's term automatically expires three (3) months after high school graduation. High schools represented by the youth committee include: Calallen, Carroll, Coles, Collegiate, Flour Bluff, Incarnate Word Academy, John Paul II, King, Miller, Moody, Ray, Tuloso-Midway and West Oso. If a primary committee member is unable to attend a scheduled meeting the alternate member will be contacted.

#### CREATION / AUTHORITY

Ordinance No. 026539, 11-14-05; Ordinance No. 027947, 11-18-08; Ordinance No. 028174, 5-19-09.; Motion 2009-280, 9-29-09; Ordinance 028325, 9-29-09.

#### MEETS

3rd Thursday of the month at 6:00 p.m., October, January and May

#### TERM DETAILS

Two-year terms.

#### DEPARTMENT

Parks and Recreation Department

#### COMMITTEE/ SUBCOMMITTEE AGENDAS

N/A

#### OTHER INFORMATION

## City Council's Youth Advisory Committee Members January 24, 2017

Thirteen (13) primary members and thirteen (13) alternate members with terms to 9/29/17. (Note: Calallen and Coles High Schools did not submit recommendations and Carroll High School only submitted a name for a primary member. The principals from the respective high schools have made the following recommendations for ratification by the City Council.)

Name	Board name	Status	District	Term	End date	Category	Position
Justine Borchard	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Calallen High School	Primary
Kyle Hill	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Calallen High School	Alternate
Ernest Buitron, II	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Carroll High School	Alternate
Leslie Salomon	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Carroll High School	Primary
Vacant	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Vacant			9/29/2015	Coles High School	Alternate
Vacant	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Vacant			9/29/2015	Coles High School	Primary
Benjamin Godinez	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 3	1	9/29/2015	Collegiate High School	Alternate
Andrea Hernandez	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Collegiate High School	Primary
Caroline Ellis	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Flour Bluff High School	Primary
Carl Hartwick	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Flour Bluff High School	Alternate
Mary Hubert	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Incarnate Word Academy	Primary
Vacant	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Vacant			9/29/2015	Incarnate Word Academy	Alternate
Nicholas Garza	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	John Paul II High School	Primary
Olivia Hinojosa	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	John Paul II High School	Alternate
Olivia Noble	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	King High School	Primary
Keith Roperes	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	King High School	Alternate
Kaitilyn Hamling	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Miller High School	Primary
Krishna Patel	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Miller High School	Alternate
Carlos Olvera	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Moody High School	Alternate
Kyla Vina	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Moody High School	Primary
Alisha Beirne	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Ray High School	Alternate
Joshua Ferrell	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Ray High School	Primary
Juan Fuentes	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Tuloso-Midway High School	Primary
Victoria Thomas	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	Tuloso-Midway High School	Alternate
Francisca Ricardo	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	West Oso High School	Alternate
Eric Silguero	CITY COUNCIL'S YOUTH ADVISORY COMMITTEE	Not seeking reappointment	District 1	1	9/29/2015	West Oso High School	Primary

## City Council's Youth Advisory Committee Applicants January 24, 2017

Name	Board Applying For	District	School	Grade	Category
Hannah Mayo	City Council's Youth Advisory Committee	District 5	Mary Carroll High School	12	Primary
Hector Piris	City Council's Youth Advisory Committee	District 3	Collegiate High School	11	Primary
Jailene Robledo	City Council's Youth Advisory Committee	District 3	Collegiate High School	11	Alternate
Noah Earley	City Council's Youth Advisory Committee	District 5	Flour Bluff High School	11	Primary
Marina Langford	City Council's Youth Advisory Committee	District 4	Flour Bluff High School	11	Alternate
Amille Bottom	City Council's Youth Advisory Committee	District 4	Incarnate Word Academy	11	Primary
Ashley Montgomery	City Council's Youth Advisory Committee	District 5	Incarnate Word Academy	11	Alternate
Christian McAllister	City Council's Youth Advisory Committee	District 5	John Paul II High School	11	Primary
Christina Okoniewski	City Council's Youth Advisory Committee	District 5	John Paul II High School	12	Alternate
Akash Maheshwari	City Council's Youth Advisory Committee	District 4	King High School	11	Primary
Mark Infante	City Council's Youth Advisory Committee	District 5	King High School	12	Alternate
Justine Wade	City Council's Youth Advisory Committee	District 1	Miller High School	11	Primary
Felipe Alvarez	City Council's Youth Advisory Committee	District 5	Miller High School	11	Alternate
Monique Martinez	City Council's Youth Advisory Committee	District 2	Moody High School	11	Primary
Kim Cornejo	City Council's Youth Advisory Committee	District 5	Moody High School	12	Alternate
Katie Gasiorowski	City Council's Youth Advisory Committee	District 4	Ray High School	11	Primary
Tyler Johnson	City Council's Youth Advisory Committee	District 4	Ray High School	11	Alternate
Jaime Castillo	City Council's Youth Advisory Committee	District 1	Tuloso-Midway High School	11	Primary
Jaclyn Cavazos	City Council's Youth Advisory Committee	District 1	Tuloso-Midway High School	12	Alternate
Creighton Avery	City Council's Youth Advisory Committee	District 3	West Oso High School	11	Primary
Myranda Flores	City Council's Youth Advisory Committee	District 3	West Oso High School	12	Alternate

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

**City of Corpus Christi**  
**City Secretary's Office**  
**1201 Leopard**  
**Corpus Christi, Texas 78401**

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

### PERSONAL INFORMATION (Please type or print legibly)

Name Hannah Mayo

Name I prefer to be called: Hannah Mayo

Current Grade Level \_\_\_\_\_

School Mary Carroll High School

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Chris Mayo

Heather Mayo

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

## ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. select softball team (Blaze Fastpitch) / Carroll Varsity Softball grades 9-12
2. National Junior Honor Society and Spanish Honor Society '15-current
3. Student Council Executive Board grades 9-12
4. TOK (#DoThatOneThing) Council

## AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

UIL High School Varsity Softball events

## GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I would try to involve more kids in school and community activities and programs, by better advertisement and teachings of the rewards. I would also love to see kids educated more through the school and community on how to manage and care for themselves once they graduate high school.

2. What do you consider to be the major concerns of youth throughout this community?

truancy, underage drinking (drinking and driving especially), lack of preparation for kids (post high school), school/extracurricular involvement

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I would love to ~~be~~ be able to discuss and correct concerns that are brought up by my friends and peers. Being a voice for kids my age would be an honor.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Hannah Mayo

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

Hannah Mayo  
Signature of Parent/Guardian

12/1/16  
Date

Hannah Mayo  
Signature of Applicant

11/29/16  
Date

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

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1201 Leopard  
Corpus Christi, Texas 78401

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### PERSONAL INFORMATION (Please type or print legibly)

Name Hector Piris

Name I prefer to be called: Hector

Current Grade Level \_\_\_\_\_

School Collegiate High School

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) \_\_\_\_\_

Carmen Piris

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

→ Cell Phone Number ✓ \_\_\_\_\_

Circle preferred number for contact

E-mail Address. ✓ \_\_\_\_\_

### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. Robotics
2. RCIA
3. Food Bank of Corpus Christi
- 4.

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

I am an 11<sup>th</sup> grader at Collegiate high school. I get a somewhat big work load. Also, I could be taking college classes.

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I would go to schools and have a meeting with each grade. I would have activities to help the youth with their self-confidence. They need to learn how to have a voice.

2. What do you consider to be the major concerns of youth throughout this community?

The major concern for the youth is not having a voice. The adults around them make them feel small and intimidate them.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to be able to help the youth in having a voice. I know how it is but I learned how to speak up, and I want to give them that skill.



REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Hector Piriis

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

Carmen Piriis  
Signature of Parent/Guardian

11-28-16  
Date

Hector Piriis  
Signature of Applicant

11-28-16  
Date

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act.

## WHY SHOULD YOU APPLY?

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Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

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Corpus Christi, Texas 78401

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### PERSONAL INFORMATION (Please type or print legibly)

Name Jailene Robledo

Name I prefer to be called: Jai

Current Grade Level \_\_\_\_\_

School Collegiate High School

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Name of Parent(s)/Guardian(s) Fernando Robledo

& Elia Ibarra

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. Student Council- Governor of the Junior class
2. Costal Bend Bay Foundation- volunteer
3. President of Service Club at Collegiate High School
4. AVID Ambassador Collegiate High School

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

My after school activities will not affect my participation in the City Council's Youth Advisory Committee.

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I would focus on fixing the roads in lower income neighborhoods. The funding used to fix roads is focused on the "tourist" and high income areas. To increase ownership of our city, the youth needs to see that the city council cares about all citizens.

2. What do you consider to be the major concerns of youth throughout this community?

A couple of major concerns of youth throughout this community is teen pregnancy and the lack of family structure that provides support to teenagers to help them succeed in school and life.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

Not too many teenagers are involved in community affairs. I wish Corpus Christi offered more for its teenagers. Maybe if more teens voiced or engaged in community decisions, Corpus Christi would be a better place to live in.

**REFERENCES (OPTIONAL)**

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

**PARENT/GUARDIAN APPROVAL**

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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**PARENT/GUARDIAN APPROVAL FORM**

Name of Applicant (Please print): Jailene Robledo

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

Elia Hobarra  
Signature of Parent/Guardian

11/28/16  
Date

Jailene Robledo  
Signature of Applicant

11/28/16  
Date

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act.

## WHY SHOULD YOU APPLY?

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Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee

### APPLICATION

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City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

### PERSONAL INFORMATION (Please type or print legibly)

Name Noah Earley

Name I prefer to be called: Noah

Current Grade Level \_\_\_\_\_

School Flower Street High School

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Pamela Peiles

Jay Knienm,

Home Address \_\_\_\_\_

City Corpus Christi, TX Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Call Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated:

1. FIRST Tech Challenge Robotics
2. UIL One Act Play
3. UIL Current Events
4. Flour Bluff ISD Student Health Advisory Committee

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

I may have UIL One Act Rehearsals, but  
I should not have many issues.

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I would work with city officials to increase  
activities for youth in the city by opening volunteer  
opportunities, and increasing access to recreational  
facilities.

2. What do you consider to be the major concerns of youth throughout this community?

I believe that youth in the city  
are concerned with the lack of city  
sponsored recreational activities, as well as  
community safety.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to participate in the Youth Advisory  
Committee, because I want to work to  
better lives of youth in the city, and  
engage with more of the community.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.


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PARENT/GUARDIAN APPROVAL FORM


Name of Applicant (Please print): Noah Earley

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

  
\_\_\_\_\_  
Signature of Parent/Guardian

12-1-16  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature of Applicant

12-1-16  
\_\_\_\_\_  
Date

## WHY SHOULD YOU APPLY?

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1201 Leopard  
Corpus Christi, Texas 78401

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#### PERSONAL INFORMATION (Please type or print legibly)

Name Marina Langford

Name I prefer to be called: Marina

Current Grade Level \_\_\_\_\_

School Flour Bluff High School

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) \_\_\_\_\_

Kristina Langford

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number ( )

Circle preferred number for contact

E-mail Address: \_\_\_\_\_



### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated:

1. Flour Bluff High School Swim Team
2. Driscoll Children's Hospital Teen Volunteer program
3. University Preparatory Senate
4. American Sign Language Honor Society

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

I have no time commitments that would affect my full participation in the City Council's Youth Advisory Committee.

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

To make a difference for youth in my community I would encourage my peers to participate in community activities. I would encourage them by improving youth lives and their education. I would specifically focus on making health education more accessible.

2. What do you consider to be the major concerns of youth throughout this community?

The major concerns of youth throughout this community is that kids are disconnected from today's issues and not involved in their community and government.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I would like to participate in the Youth Advisory Committee because I would like to make a difference in my community for the better.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Marina Laraford  
For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

[Signature] 12-1-16  
Signature of Parent/Guardian Date

[Signature] 12-1-16  
Signature of Applicant Date

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

### PERSONAL INFORMATION (Please type or print legibly)

Name Amille Bottom

Name I prefer to be called: Amille

Current Grade Level \_\_\_\_\_

School Encinitate World Academy

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Ellich Brent

Bottom and Stephanie Bottom

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: J \_\_\_\_\_

## ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. NATIONAL Honor Society
2. Junior Editor of the Incarnate Word Academy Yearbook
3. TAPP'S (one Act Play Actress)
4. Competitive Horse-back riding in the American Quarter Horse Association and United States Equestrian Federation

## AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

None

## GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I would wish to unite the youth of Corpus Christi and help prepare them for the next stage of their lives. I would organize seminars where teens could learn to understand the adult world, such as how to pay taxes and manage a budget. Youth will learn the necessary information that they are not given in school, becoming part of a problem-solving group of youth.

2. What do you consider to be the major concerns of youth throughout this community?

A major concern of youth throughout this community is maintaining an environment that supports prosperous jobs. A second issue is keeping our schools challenging and current. Having unique cultural and outdoor entertainment activities for youth will help to unite the youth of the community.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to participate in the City Council's Youth Advisory Committee because I truly want to make a difference for my peers and unite Corpus Christi's youth in a few educational experiences. The Youth Advisory Committee will allow me to facilitate this experience.



## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

### PERSONAL INFORMATION (Please type or print legibly)

Name Ashley Montgomery

Name I prefer to be called: Ashley

Current Grade Level 9

School Immanuel Word Academy

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Theresa and Alvin Montgomery

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. Incarnate Word Academy TAPPS Academic Team
2. Incarnate Word Academy Yearbook Junior Editor
3. Incarnate Word Academy Theatre / One Act Play
4. National Honor Society

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

Nothing that I anticipate would interfere

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I would like to facilitate meetings or events that allow youth to find passions and interests as well as meet others with similar interests. I think we have a lot of talent in this community waiting to be cultivated.

2. What do you consider to be the major concerns of youth throughout this community?

As well as helping students find interests, I think a stronger respect and desire for education must be promoted. Youth should be excited about school.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I've always had many ideas about helping Corpus grow and develop, so I hope this can be a way in which I do that.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Ashtley Montgomery

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

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Signature of Parent/Guardian

Date

Ashtley Montgomery  
Signature of Applicant

11-30-2016  
Date



## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

### PERSONAL INFORMATION (Please type or print legibly)

Name Christian McAllister

Name I prefer to be called Christian

Current Grade Level \_\_\_\_\_

School St. John Paul II High School

Date of Birth \_\_\_\_\_ ex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Candy McAllister

Rev. M. Allister

Home Address \_\_\_\_\_

City Corpus Christi, TX Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. Cathedral Choir
2. Marching Band
3. Robotics
4. School Retreats

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

On occasions, I may have practice for the Cathedral Choir on Thursdays, but it is rare.

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

The difference I would like to see is an increase in academic success within the youth in our community. I would like to work with the CCYAC to help develop a program to encourage academic success and to ensure their talents remain in Corpus Christi.

2. What do you consider to be the major concerns of youth throughout this community?

I would consider a lack of academic motivation, drugs, and a limited number of mentoring programs to be some of the major concerns.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I wish to see our city grow and prosper through the youth who will be its leaders one day.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

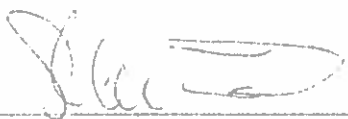
Have your parents complete the Parent/Guardian Approval form ( see below ) and turn the completed form in with your application.

PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Christian McAllister

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees, from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees, to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

  
\_\_\_\_\_  
Signature of Parent/Guardian

10/31/16  
\_\_\_\_\_  
Date

Christian McAllister  
\_\_\_\_\_  
Signature of Applicant

10/31/16  
\_\_\_\_\_  
Date

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Application for membership in the City Council's Youth Advisory Committee (CCYAC) is open to all students in grades 7-12 who are currently attending school in the City of Corpus Christi. The City Council's Youth Advisory Committee is a group of young people who advise the City Council on issues affecting the youth in Corpus Christi. This application will be considered by the City Council on the 15th of the month. You may indicate your preferred contact information.

### PERSONAL INFORMATION (Please type or print legibly)

Name Cristina E. Okoniewski

Name I prefer to be called: Cristina

Current Grade Level \_\_\_\_\_

School St. John Paul II HS

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) \_\_\_\_\_

Steve + Laura Okoniewski

Home Address \_\_\_\_\_

City C.C. Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

## ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. Dance Team (4 years)
2. Habitat for Humanity
3. Various Special Needs (Special Hearts Team, Special Olympics bowling, track meet)
4. \_\_\_\_\_

## AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

I am very involved with school and clubs but I am willing to work diligently to go to these meetings

## GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I think that I would make the public parks more family friendly and safe. I would do this by getting people to patrol the park and watch for unsafe behavior.

2. What do you consider to be the major concerns of youth throughout this community?

Many teens are becoming involved with harmful extracurriculars and I believe we should put a stop to that. The youth today are getting robbed of their childhood.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to be more involved in the community and I see this as a once in a lifetime opportunity. I love to be involved with the community and I'd love to take part in making positive changes.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Cristina F. Okoniewski

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

[Signature] \_\_\_\_\_ 12/14/16  
Signature of Parent/Guardian Date

[Signature] \_\_\_\_\_ 10/14/16  
Signature of Applicant Date

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act.

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time.

### PERSONAL INFORMATION (Please type or print legibly)

Name Akash Maheshwari

Name I prefer to be called: Akash

Current Grade Level \_\_\_\_\_

School Richard King High School

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) \_\_\_\_\_

M. and V. Maheshwari

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

## ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. American Red Cross king chapter founder (motivating kids to be involved in community activities i.e. Hope)
2. American Chemical Society (ACS) Chemistry Club President
3. (CLSD) student ambassador for King High School (representing students' concerns to the school board)
4. Corpus Christi Chamber Orchestra member (Violin)

## AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

Although I am involved in various activities, I would make sure to make time and be fully available for the meetings.

## GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

After my experiences with bullying, I feel that we need to raise more public awareness about teen bullying and depression like the suicide prevention/awareness walk that I participated in last month. Also, I think it is important to provide safe havens for bullied students to express their feelings with others going through similar issues. This will help them realize that there is nothing wrong with them and <sup>help them</sup> learn effective coping mechanisms to deal with their emotions and emerge stronger as a result.

2. What do you consider to be the major concerns of youth throughout this community?

Bullying and obesity are the two paramount concerns of the youth. To be bullied during the crucial time of adolescence is so detrimental because it ultimately damages an individual's self-esteem and outlook on life, leading many to depression and suicidal thoughts. Adolescent obesity leads to many diseases later on in life, so it is imperative that adolescents make healthy decisions about the food they consume and the daily activities in which they are involved.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to participate in the CCYAC because I feel it is such an extraordinary opportunity to be the voice of so many teens, to communicate the key concerns they face and to advocate positive ways for change in the community. Positively impacting even one person's life for the better will make this an immensely meaningful and rewarding experience for me.



REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

Please look for letters of recommendation from Mrs. Salinas and Mr. Markintaya

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): AKASH MAHESHWARI

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

[Signature]  
Signature of Parent/Guardian

11/1/16  
Date

Akash Maheshwari  
Signature of Applicant

11/1/16  
Date

Please consider two recommendations from Mrs. Salinas and Mr. Markintaya. Being maile to your office.

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act.

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time.

### PERSONAL INFORMATION (Please type or print legibly)

Name Mark Infante

Name I prefer to be called: Mark

Current Grade Level \_\_\_\_\_

School Richard King HS

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Paul and Angelica Infante

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. King HS Marching Band
2. Academic Decathlon Honors Team
3. Speech and Debate Team (Public Forum Debate)
4. Superintendent's Student Ambassador Council

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

No time commitments that affect participation.

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

A goal would be to show the youth the benefits of having a good education in order to promote those students' future success. I would do this by talking to middle and elementary school students the benefits of focusing on academics and the benefits of going to college.

2. What do you consider to be the major concerns of youth throughout this community?

Although a prevalent problem in many communities, the most significant problem this community faces is drug and alcohol use of the youth. This community also faces the problem of education inequality.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

This is the best way for me to make a positive impact to the community. I can act as the voice of the youth of in order to ~~better~~ give city leaders a better understanding of the perspective of younger generations.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Mark Infante

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

Kyle C. [Signature] 11/2/16  
Signature of Parent/Guardian Date

Mark Infante [Signature] 10/2/16  
Signature of Applicant Date

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time.

### PERSONAL INFORMATION (Please type or print legibly)

Name Justine Wade

Name I prefer to be called: Justine

Current Grade Level \_\_\_\_\_

School Ray Miller High School

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Name of Parent(s)/Guardian(s) Margarita Martinez  
Justin Wade Sr.

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

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

## ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. National Honor Society
2. National Hispanic Institute
3. Miller Varsity Volleyball
4. Young Life

## AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

Although, I am involved in various leadership activities I am able to manage my time. I keep my calendar of events up to date and current so that I can avoid conflicts.

## GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

As a member of the National Hispanic Institute I have been given the opportunities to mentor youth like myself to advocate for themselves and pursue higher education. This is something that I am passionate about.

2. What do you consider to be the major concerns of youth throughout this community?

Within education I feel that more strong and committed mentors are needed at the high school levels. This would provide youth an opportunity to build relationships with people who have a vision and goals in life which would then encourage them to do the same and become productive citizens.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I plan to pursue a career in communications. Being a part of the City Council Youth Advisory Committee would give me an opportunity and experience that is needed in this field. I also feel that I can communicate and relate with youth of my generation and adults.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Justine Wade

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

  
\_\_\_\_\_  
Signature of Parent/Guardian

11.8.16  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature of Applicant

08/Nov. 2016  
\_\_\_\_\_  
Date

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

**City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401**

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

### PERSONAL INFORMATION (Please type or print legibly)

Name Felipe Alvarez

Name I prefer to be called: Felipe

Current Grade Level \_\_\_\_\_

School Ray Miller/Metro high school

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Name of Parent(s)/Guardian(s) Diana Ramirez (mother)  
Robert Ramirez (stepdad)

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_



## ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. National Honors Society
2. Miller high school Key club
3. Mu Alpha Theta Math honors Society
4. Miller High School Junior council

## AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

School - Monday through Friday 8am - 5:30pm

## GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

One thing I would do is get the youth more involved within the community. I will do so by informing people of the opportunities and events that are taking place, Over social media platforms, by handing out flyers, and by word of mouth. By doing this I believe the youth will have a better understanding of how being involved in our community can effect it.

2. What do you consider to be the major concerns of youth throughout this community?

The youths lack of care for their own education is very concerning. As a student in highschool I've noticed that many students don't care about their education as much as they should, and would rather goof around or not attend school altogether. Since schools are a safe environment for students to learn, whenever students don't attend, they may be exposed to misguidance which can effect our community negatively.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

The city Council's youth advisory committee is a great opportunity to become involved within the community. I want to take advantage of this opportunity so I can assist the community in promoting activities involving the youth and spread awareness on city issues.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Felipe Alvarez

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

Olana Ramirez  
Signature of Parent/Guardian

11-1-16  
Date

Felipe Alvarez  
Signature of Applicant

11-7-16  
Date

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

### PERSONAL INFORMATION (Please type or print legibly)

Name Monique Martinez

Name I prefer to be called: Monique

Current Grade Level                     

School Foy H. Moody High School

Date of Birth                      Sex (M/F)                     

Name of Parent(s)/Guardian(s) Angel Martinez  
Eric Martinez

Home Address                     

City Corpus Christi Zip                     

Home Phone Number                     

Cell Phone Number                     

Circle preferred number for contact

E-mail Address:

## ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. Junior Council - President
2. Cross Country + Track and Field
3. National Honor Society
4. St. Cyril and Methodias Lifeteen

## AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

There are no time commitments that would interfere with the Thursday evening meetings for this Youth Advisory Committee.

## GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

If I could make a difference for youth in my community, I would make more resources available to help us plan for our future and for college. I would want us to have programs where we could shadow professionals in our career to see if it's something we really want to do and make more adults willing to help and support us.

2. What do you consider to be the major concerns of youth throughout this community?

Some major concerns of youth in our community are bullying, good citizenship, and opportunities to prepare for our future. I think youth need to be kinder to others, learn to be active in the community, and receive more help from adults in the community regarding careers and occupations.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to participate in the City Council's Youth Advisory Committee because I feel the issues concerning youth are often overlooked. I would like to change that and be a voice for youth and kids my age in our city.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Monique Martinez

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

  
Signature of Parent/Guardian

11.5.16  
Date

  
Signature of Applicant

11/5/16  
Date

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

**City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401**

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

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### PERSONAL INFORMATION (Please type or print legibly)

Name Kim Cornejo

Name I prefer to be called: Kim

Current Grade Level \_\_\_\_\_

School TOY H MOODY HIGH SCHOOL

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Brian & Cristina  
Cornejo

Home Address \_\_\_\_\_

City CORPUS CHRISTI Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

## ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. NATIONAL HONOR SOCIETY - VICE PRESIDENT
2. SCIENCE CLUB - SECRETARY
3. DRISCOLL CHILDREN'S HOSPITAL YEAR-ROUND VOLUNTEER
4. ACADEMIC DEBATHION

## AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

Every Monday after school I have Academic Decathlon practice. On Tuesdays I have Science Club. On Thursdays I have NHS meetings and Mu Alpha Theta until 5 PM and on Fridays I volunteer at Driscoll Children's Hospital from 6-8 AM.

## GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

The difference I want to make for the youth in my community is to let other kids know that there are countless opportunities for them, also regarding one's background. I would achieve this goal of spreading awareness of opportunities by talking to other youths about internships and volunteer opportunities in fields that they are interested in.

2. What do you consider to be the major concerns of youth throughout this community?

A major concern for the youth throughout this community is the lack of planning one's future. Many youths seem to focus more in the present and having fun, while giving little to no thought about one's future goals such as university and career choice.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to participate in the City Council's Youth Advisory Committee to deliver the message that there are countless opportunities out there if one searches for it. More importantly, I want the youth in my community to open their eyes to reality so they can be well prepared for when the time comes.





You can make a difference in  
your community.

You can find a student  
issue in your district.

## APPLICATION

To be considered for the City Council's Youth Advisory committee (CCYAC) students will need to complete this application and returned to their respective high school principal's office.

Important: You must currently be a student in 11th grade, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. You may update your application at any time.

### PERSONAL INFORMATION (Please type or print legibly)

Name Katie Gasiorowski

Name I prefer to be called: Katie

Current Grade Level \_\_\_\_\_

School Ray High School

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Laura +

Brian Gasiorowski

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

activities which you have participated.

1. Student Council (officer)
2. Mission Fit Possible Ambassador
3. Regular volunteer at First Baptist Church
4. National Honor Society

#### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

I have student council after school on Mondays and Thursdays. I am flexible with all of my other clubs and commitments.

#### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

If I could make a difference for youth in my community I would try to make improvements in our community that would help youths become more successful in school and eventually in life.

2. What do you consider to be the major concerns of youth throughout this community?

In this community I am concerned about underage alcohol abuse, drug use, and truancy in our youth. For youth in general, struggling in school and truancy are concerns.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I would like to participate in the City Council's Youth Advisory Committee because I care about the lives of other people my age and I want to help many people and youth to succeed as possible.

PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Katie Gasiorowski

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

Thomas M Gasiorowski 11/11/15  
Signature of Parent/Guardian Date

Katie Gasiorowski 11/11/15  
Signature of Applicant Date

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act.

# YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

**City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401**

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

### PERSONAL INFORMATION (Please type or print legibly)

Name Tyler Johnson

Name I prefer to be called: Tyler

Current Grade Level \_\_\_\_\_

School W.B. Ray High School

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Renee Johnson  
Trevor Johnson

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

1. I V R U Triumph over AIDS Concert
2. W.B. Ray Texas Anglers Fishing Club
3. W.B. Ray NHS
4. W.B. Ray Spanish Honor Society

#### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

Dual credit classes Spring Semester, Monday, Wednesday  
Roughly 5-6:50

#### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I would encourage kids to be more involved in school and ensure parent involvement.

2. What do you consider to be the major concerns of youth throughout this community?

Drugs, not being involved in education, and no goals

3. Why do you want to participate in the City Council's Youth Advisory Committee?

To help improve the community and to gain awareness of my community.

ences for mailing.

**PARENT/GUARDIAN APPROVAL**

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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**PARENT/GUARDIAN APPROVAL FORM**

Name of Applicant (Please print):

Tyler Johnson

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

  
\_\_\_\_\_  
Signature of Parent/Guardian

12/12/16  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature of Applicant

12/12/16  
\_\_\_\_\_  
Date

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act.

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee

### APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

### PERSONAL INFORMATION (Please type or print legibly)

Name Jaime N. Castillo

Name I prefer to be called: Jaime

Current Grade Level \_\_\_\_\_

School Trinidad Midway

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) Ed and

Chryssy Castillo

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. church youth group
2. Football
3. FCA
4. HOSA

AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

Football practice.

GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

More community activities for teenage students

2. What do you consider to be the major concerns of youth throughout this community?

~~Having~~ Having something productive to do with their time

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I feel I can make a difference.



REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

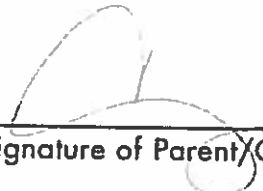
Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Juan Nicholas Castillo  
For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

  
\_\_\_\_\_  
Signature of Parent/Guardian

11/30/2014  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature of Applicant

11/30/2014  
\_\_\_\_\_  
Date

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act.



### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. National Honor Society
2. St. Peter's Prince of Apostle's High School Youth Group.
3. Rotary Interact
4. Tuloso-Midway High School Cherokee Powerlifting

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

Northwest Corpus Christi Little Miss Kickball - coaching, playing, umpiring, and concession work. Begins March, ends in May; would just need a notice to get another coach to take over.

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

if I had the chance to make a difference for youth in my community, I would make a group or club, like my youth group, and try to aim it towards the kids who feel alone, need a friend, or who want to meet new people. We would be a united group and would not venture into cliques. Everyone would be accepted and encouraged to join.

2. What do you consider to be the major concerns of youth throughout this community?

Some major concerns of the youth throughout the community would be the vast amount of teens, beginning in middle school, who are participating in underage drinking as well as their participation in drugs.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to participate in the City Council's Youth Advisory Committee because I want to be a part of a group who better the lives and makes a difference, not only for one, but for the lives of many of the youth in the community.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Jaclyn Cavazos  
For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

Becky Cavazos \_\_\_\_\_ 12-4-16 \_\_\_\_\_  
Signature of Parent/Guardian Date

Jaclyn Cavazos \_\_\_\_\_ 12-06-16 \_\_\_\_\_  
Signature of Applicant Date

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee

### APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

**City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401**

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

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### PERSONAL INFORMATION (Please type or print legibly)

Name Creighton Avery

Name I prefer to be called: Creighton

Current Grade Level \_\_\_\_\_

School WEST DSO

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) \_\_\_\_\_

Cheryl Fillmore TERRY AVERY

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_

### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. Food Bank
2. Friendship Baptist Church
3. Du Work Spring Basketball League
4. Voting Polls 2016

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

Basketball - Tuesdays / Fridays After 5:00 PM

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

Have positive outings, activities for youth as well as bring in speakers who are youth from other cities and states to speak to our schools or at banquets.

2. What do you consider to be the major concerns of youth throughout this community?

Major concerns for youth is peer pressure we face in doing what's right rather than what's popular.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I want to be able to be a leader in my city for youth of all ages and be a voice to be heard.

REFERENCES (OPTIONAL)

To help us know you better, you may submit up to two (2) references from adults who know you well. These letters of reference must be mailed separately and directly to the address provided on this application form. Applicants should provide an addressed, stamped envelope to their references for mailing.

PARENT/GUARDIAN APPROVAL

Have your parents complete the Parent/Guardian Approval Form ( see below ) and turn the completed form in with your application.

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PARENT/GUARDIAN APPROVAL FORM

Name of Applicant (Please print): Creighton Aveny

For and in consideration of participation in the Corpus Christi City Council Youth Advisory Committee, the undersigned parent or legal guardian for and on behalf of the above named student, his or her heirs, executors, and assigns, does hereby release, indemnify and hold harmless the City of Corpus Christi, and any committee sponsors or advisors, their agents, officers, and employees from any and all claims, damages, personal injury, including death and property damage resulting directly or indirectly from the City Council's Youth Advisory Committee, including the planning, organization and presentation of projects as well as transportation to and from all committee activities. The undersigned parent or legal guardian consents to the City of Corpus Christi, its agents, officers and employees to transport or provide transportation whether by public bus service, private or commercial automobile or other appropriate vehicle for the above named student to and from all program activities. All still and video photography becomes the property of the City of Corpus Christi and the City Council's Youth Advisory Committee.

The undersigned parent or legal guardian understands that the above named student is committed to and required to attend monthly Youth Committee meetings and sponsored activities.

[Signature] \_\_\_\_\_ 11/29/14  
Signature of Parent/Guardian Date

Creighton Aveny \_\_\_\_\_ 11-29-14  
Signature of Applicant Date

NOTE: All information on this application is public information pursuant to the provisions of the Public Information Act.

## WHY SHOULD YOU APPLY?

You can make a difference in your community

Have a voice in addressing youth issues in your community

Become aware of existing resources for youth

Be involved in finding solutions for youth challenges and concerns

Be a leader in your community

Have a voice in supporting programs and services affecting the youth in Corpus Christi

## HOW ELSE CAN I GET INVOLVED?

Our meetings are open and volunteers are always welcome for CCYAC projects.



## City Council's Youth Advisory Committee APPLICATION

To be considered for the City Council's Youth Advisory Committee (CCYAC) this application must be completed and returned to:

**City of Corpus Christi  
City Secretary's Office  
1201 Leopard  
Corpus Christi, Texas 78401**

Important: You must currently be a student in grades 9 through 12, as well as a current resident of Corpus Christi, Texas in order to apply for participation in the City Council's Youth Advisory Committee. Your application will be considered for any vacancy on the committee. You may update your application at any time

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### PERSONAL INFORMATION (Please type or print legibly)

Name Myranda Flores

Name I prefer to be called: \_\_\_\_\_

Current Grade Level \_\_\_\_\_

School West Oso High School

Date of Birth \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Name of Parent(s)/Guardian(s) \_\_\_\_\_

Melanie Flores

Home Address \_\_\_\_\_

City Corpus Christi Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Circle preferred number for contact

E-mail Address: \_\_\_\_\_



### ORGANIZATIONS, ACTIVITIES, INTERESTS & COMMUNITY

List up to four school, volunteer, religious, social, athletic, community, or special activities which you have participated.

1. VOLUNTEER READING ENGAGEMENT TO ELEMENTARY KIDS
2. YMCA VOLUNTEER BASKETBALL COACH
3. FELLOWSHIP OF CHRISTIAN ATHLETES: FIELDS OF FAITH
4. CHRISTMAS CAROLING / CANNED FOOD DRIVE FOR NURSING HOME

### AVAILABILITY

What time commitments do you have that might affect your full participation in the City Council's Youth Advisory Committee?

NONE, I AM A WELL ROUNDED YOUNG WOMAN WITH EXCELLENT TIME MANAGEMENT SKILLS.

### GENERAL INFORMATION

1. If you could make a difference for youth in your community, what would you do and how would you do it?

I WOULD BEGIN BY CREATING A TEEN HANGOUT. THERE WOULD BE NO RESTRICTIONS ON WHO WOULD BE ALLOWED IN THIS FACILITY. THE SOLE PURPOSE OF THIS HANGOUT WOULD BE TO GIVE THE YOUTH A SENSE OF ACCEPTANCE, AND SAFETY. EVERY CHILD SHOULD HAVE A SAFE PLACE AND THAT IS WHAT I PLAN ON CREATING.

2. What do you consider to be the major concerns of youth throughout this community?

A MAJOR CONCERN IN TODAY'S SOCIETY WOULD BE THE SUICIDE RATE INCREASING. THE YOUTH ARE BEGINNING TO FEEL AS IF THERE IS NO OTHER SOLUTION. WHEN PEOPLE START TO FEEL WORTHLESS IS WHEN WE NEED TO STAND BY THEM THE MOST.

3. Why do you want to participate in the City Council's Youth Advisory Committee?

I ENJOY HELPING OTHERS. I ALSO HOLD MYSELF TO A HIGH STANDARD IN WHICH I INVOLVE MYSELF IN VARIOUS ORGANIZATIONS. BEING A MEMBER OF THE CITY COUNCIL'S YOUTH ADVISORY COMMITTEE WOULD BE VERY BENEFICIAL TO MY FUTURE PLANS.

