

Make-A-Wish Greater Bay Area Youth Board



APPLICATION FOR AUGUST 2017-JUNE 2018 TERM

Please complete the application and return to Make-A-Wish Greater Bay Area at 55 Hawthorne Street, Suite 800, San Francisco, CA 94105. Applications can also be submitted to jwilson@SFWish.org. Completed applications are due by July 1, 2017. We will contact you by the end of August. Thank you so much for your consideration!

PERSONAL INFORMATION

Applicant's Full Name

Home Address (including city and ZIP code)

Home Telephone

Student Cell phone

Parent Cell phone

Student Email Address

Parent Email Address

SCHOOL INFORMATION FOR AUGUST '17 - JUNE '18 SCHOOL YEAR

Name of School

School Address (including city and zip code)

Grade in fall '17

2016-2017 GPA



Please answer the questions below. Feel free to attach additional sheets as needed.

1. What motivated you to be part of this program? Please be honest.

2. What experience will you bring to the group? Please list any jobs, leadership positions or accomplishments that you think will serve you well in this program.

3. Members of this group often say they would like it to be more interactive and student led. How will you help make that possible?

4. We are looking for students who will be active participants in the group, including attending meetings, volunteering at events, helping fundraise and spread awareness for Make-A-Wish. What part of this program are you most excited about?

By signing below, you and your parents are confirming your commitment to make this program a priority. You will be expected to respond in a timely manner to all email communications and to actively participate in meetings.

PARENTAL / LEGAL GUARDIAN Permission:

I have reviewed the above application and Youth Board. fact sheet and understand the requirements of Youth Board. members.

Parent/Guardian, Printed Name	Signature	Date
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Parent/Guardian, Printed Name	Signature	Date
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Student, Printed Name	Signature	Date
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