

# Make-A-Wish Greater Bay Area Youth Board



## APPLICATION FOR AUGUST 2019—JUNE 2020 TERM

Please complete the application and return to Make-A-Wish Greater Bay Area at 1333 Broadway, Suite 200, Oakland, CA 94612. Applications can also be submitted to [bogawa@SF.Wish.org](mailto:bogawa@SF.Wish.org). Completed applications are due by July 1, 2019. 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 if applicable

---

Student Cell phone

Parent Cell phone

---

Student Email Address

---

Parent Email Address

### SCHOOL INFORMATION FOR AUGUST '19 - JUNE '20 SCHOOL YEAR

---

Name of School

---

School Address (including city and zip code)

---

Grade in fall '19

2018-2019 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. Why is being part of this youth board a priority for you and what would you like to accomplish if you are accepted?

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
-------------------------------	-----------	------

---

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

---

Student, Printed Name	Signature	Date
-----------------------	-----------	------

