

Roots Community Services Youth Advisory Board Application Form

Personal Information

Full Name:	Date of Birth:	Gender:		
Address:				
City:	Postal Code:			
Phone Number:	Email Address:			

Education and Background

Current School/College/University:	Grade/Year:
Field of Study (if applicable):	
Extracurricular Activities:	

Questions

- 1. Do you identify as a member of the Black African Caribbean (BAC) Community?
- □ Yes
- 🗆 No
- $\hfill\square$ Prefer not to disclose
- 2. Why are you interested in joining the Roots Community Services Youth Advisory Board?

(Please provide a detailed response)

3. What specific skills, experiences, or perspectives do you bring to the Youth Advisory Board?

(Please provide examples)

4. Describe a time when you demonstrated leadership or took initiative in your community or school.

(Please provide a detailed response)

5. What issues affecting Black African Caribbean youth in your community are you most passionate about, and why?

(Please provide a detailed response)

6. How do you think the Youth Advisory Board can impact the community? (*Please provide a detailed response*)

References

Reference #1 Name:				
Address:				
Reference #2				
Name:				

Relationship:	Phone Number:	Email:
Address:		

Availability

□ Are you able to commit to monthly meetings and additional activities as required?

- □ Yes
- 🗆 No

□ Do you have any specific needs or accommodations that we should be aware of to support your participation in the Youth Advisory Board?

□ Yes

🗆 No

 \Box If yes, please specify:

Declaration

I, the undersigned, certify that the information provided in this application is true and correct to the best of my knowledge. I understand that any false statements may result in my disqualification from the application process.

Signature:

Date:

Submission Instructions

Please submit your completed application form to **nyah@rootscs.org** or drop it off at our office located at **36 Queen Street East, Brampton, ON, L6V 1A2.**

For any questions or further information, please contact **Godfred at 289-541-3334** or **godfred@rootscs.org**.