



# YOUTH ADVISORY COUNCIL APPLICATION

## BACKGROUND:

Thank you for your interest in the City of Alachua Youth Advisory Council (YAC). The purpose of the Council is to stimulate and foster the active participation of young individuals in the addressing of issues impacting the youth of the community to ensure leaders of tomorrow have input in the local government process today.

The YAC serves in an advisory capacity to the City of Alachua Commission. There are five (5) voting members of the YAC and a General Council made up of non-voting members. All voting members are appointed by the City of Alachua Commission. The General Council members are appointed by the voting members of the YAC.

## ELIGIBILITY:

Applicants must be enrolled in a public school, private school or a home education program within the city of Alachua in grades nine through twelve.

## MEETINGS:

The YAC meets at least quarterly or more often as directed by the YAC. The meetings are held in the James A. Lewis Commission Chambers at Alachua City Hall and are open to the public.

**Instructions: Complete all fields below and on page 2 and submit application and letter of recommendation to:**

City of Alachua  
Attn: Deputy City Clerk's Office  
P.O. Box 9  
Alachua, FL 32616

Student: Aidan Grosz E-mail: aidan.grosz@gmail.com  
Home Address: 11901 NW 112th AVE City: Alachua State: FL Zip: 32615  
Home Phone: 3865185292 Cell Phone: 3865185292  
School: EASTSIDE HS Grade: 9th  
Parent/Guardian: Esmond, Michele Grosz Parent/Guardian Phone: 4075925064

*I have read and understand the commitment required as a member of the City of Alachua Youth Advisory Council. I will be a positive representative of youth in the community and serve to accomplish the goals and duties of the Youth Advisory Council.*

Student Signature: [Signature] Date: 8-11-19

Parent/Guardian Permission: I give my permission for Aidan Grosz to apply to and participate as a member of the City of Alachua Youth Advisory Council.

Parent/Guardian Signature: [Signature] Date: 8-11-19



City of  
**ALACHUA**  
THE GOOD LIFE COMMUNITY

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Please check only one (1). I am applying for membership as a: ☒ Voting Member  
☐ General Council Member

1. Why do you want to serve as a member of the City of Alachua Youth Advisory Council?

I want to serve on this council so I can prove that I'm a good leader. I also want to ~~have~~ serve because I want to have a small part in making Alachua better.

2. Explain how you are involved in your school and/or community. List all extracurricular activities.

I participate in NWOTC, TRACK & FIELD, Cross Country, and Boy Scouts of America.

3. What skills, talents and abilities do you have that will be beneficial in accomplishing the goals and duties of the City of Alachua Youth Advisory Council?

I am able to work hard in difficult situations. I take responsibility for my actions. I inspire others to be motivated. I am friendly and kind, and also want to see Alachua become better.

4. List two (2) adult references (non-relatives) with phone numbers.

**Reference 1**

Name: Mike Melvin  
Relationship: BSA Guide  
Phone: 352-318-7650

**Reference 2**

Name: Rhonda Dickhaut  
Relationship: Advancement Coordinator  
Phone: 352-215-6501

5. Attach one (1) letter of recommendation from a staff/faculty member of your school.

My Reference letter from Steve Doherty will be emailed directly to Leanne Williams prior to September 2nd. Thank you Leanne.