



OFFICE USE ONLY

Date Received: _____

Action: _____

Notes: _____

Youth Advisory Board Application

Thanks for your interest in joining the NYFC Youth Advisory Board. Please complete the following form in order to be considered.

Name: _____

Date of Birth: _____

Current School & Year: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

E-mail: _____

Major & Career Interest: _____

Name of Foster Care Agency: _____

Foster Care Agency Phone Number: _____

Foster Care Status: _____

Please complete a **one-page essay** addressing the following statements:

1. Describe why you are interested in serving on the Youth Advisory Board.
2. Describe a previous volunteer experience that made an impact on you.
3. Describe any other leadership roles or experiences you have had and what they taught you.

Return this form and your essay to:

New Yorkers For Children

450 Seventh Avenue

Suite 403

Phone: (646) 257-2930

Fax: (646) 257-2931

program@newyorkersforchildren.org

The Youth Advisory Board (YAB) supports New Yorkers For Children by shaping public awareness and perceptions of children and youth in foster care, and inspiring peers to become advocates in their communities. YAB collaborates with other programs for positive youth development, education, and professional success, while inspiring New Yorkers of all ages and walks of life to strengthen society.