**CALLING ALL YOUTH CHANGEMAKERS!  
BC *YOUTH LEADING YOUTH ADVISORY COMMITTEE FOR LIFE PROMOTION***

**APPLICATION FORM FOR MEMBERSHIP**

Please tell us a little bit about yourself and why you think you would make a great member of the *Youth Leading Youth Advisory Committee for Life Promotion*!

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| --- | --- |
| NAME: |  |
| GENDER: (if applicable) |  |
| DATE OF BIRTH: (day/month/year) |  |
| ADDRESS: |  |
| NATION OR HOME COMMUNITY:  (if different from Address) |  |
| PHONE NUMBER: |  |
| EMAIL ADDRESS: |  |

1. Why do you want to be a founding member of the *Youth Leading Youth Advisory Committee for Life Promotion*?

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1. What do you think you could accomplish in three years as a member of the *Youth Leading Youth Advisory Committee for Life Promotion*?

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1. What experience, interests, or community involvement do you have that would make you an important member of the *Youth Leading Youth Advisory Committee for Life Promotion*? (Ex: lived experience with suicide, being a team member, volunteering, student council membership, etc.)

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1. What inspired you to want to make a difference?

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1. Are you available and able to attend the first in-person gathering for the *Youth Leading Youth Advisory Committee for Life Promotion* on February 16th-17th, 2018 at Sts’ailes Lhawathet Lalem (Agassiz, BC)? (Travel expenses will be covered)

* **YES ❑ NO**

**INSTRUCTIONS FOR APPLICANTS**

1. Please complete the application form above and email it to: [shannon.laflamme@fnha.ca](mailto:shannon.laflamme@fnha.ca)
2. Include a letter of reference from a Teacher/Chief/Council member/Elder or other community leader who nominates you for this important role as a youth leader and supports your participation as a member of the *Youth Leading Youth Advisory Committee for Life Promotion.*

Both the completed application form and the reference letter must be received by **4:00pm on Friday, February 16th, 2018.**

Accepted applicants will be notified by phone or email on or before Wednesday, February 14th, 2018.

Thank you!