APPLICATION FOR THE
2024 PITMAN YOUTH ADVISORY COUNCIL

This form must be submitted in person at Borough Hall or given to Dr. Blass (PHS) or Mr. DiTizio (PMS) in person or to Borough Administrator McCafferty through email (smccafferty@pitman.org) by 3:30 PM on Friday, December 15, 2023.

PLEASE COMPLETE THIS FORM ACCURATELY AND IN ITS ENTIRETY

Name _____

Home
Address:_____

Phone number _____ Email _____

School:_____

School Year: □ Eighth Grade □ Freshman □ Sophomore
□ Junior □ Senior

Certification from school that grade average is at least a 78 on a hundred-point scale.

_____
Guidance Counselor´s signature School stamp

_____

Please List Any Extracurricular Activities (Indicate years active and leadership positions, if applicable, and attach additional sheets, if necessary)

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Please List Any Community Service Activities in which you have participated:

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Why do you want to be a member of the Pitman Youth Advisory Council?

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Please describe one or two Borough issues you would like to work towards improving through this program:

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I, the applicant, have completed this application for the Pitman Youth Advisory Council to the best of my ability. With my signature, I submit this application.

APPLICANT SIGNATURE: _____

DATE: _____