



New York National Guard Teen Council



SECTION I: Applicant Information

Teen Name: _____ Name you prefer to use: _____

Date of Birth: _____ Gender: _____

Social Security Number: _____ - _____ - _____ Current Year of School: _____

Mailing Address:

Street: _____ City: _____

County: _____ Zip: _____

Home Phone Number: _____ Teen Cell (if applicable): _____

Teen Email Address: _____

Drivers License: (Yes or No): _____

Does Teen Have/Use The Following: Yes or No

Facebook: _____ Twitter: _____ Skype: _____ Text: _____ PowerPoint: _____ Email Daily: _____

SECTION II: Parent or Legal Guardian Information

Name of Mother/Rank: _____

Email Address: _____

Home Phone Number: _____ Cell Phone: _____

Name of Father/Rank: _____

Email Address: _____

Home Phone Number: _____ Cell Phone: _____

Name of family member/Rank, if not a parent, in the NYNG: _____

SECTION III: School Information

Name of School: _____ School District: _____

School Address: _____

School Phone Number: _____

Name of Principal: _____ Name of Dean (if applicable): _____

Name of Guidance Counselor: _____

Name of a Teacher Reference: _____ Subject Taught: _____

Contact Info (Email or Phone) _____

Can we contact this person? _____ Best Time of Day to Contact? _____

SECTION IV: Teen Council Commitment

Answer the following questions (Please use space provided or a separate piece of paper):

1. *What are some of your extracurricular activities and volunteer experiences that you have?*

2. *What are three character traits that describe you the best, and why?*

3. *What special skills will you bring to the Teen Council?*

4. *Why do you want to be a part of the Teen Council?*

5. *If you were selected, how you would you promote the Teen Council within the state and your community?*

6. *If you could do three things to improve life for National Guard youth and teens, what would they be?*

7. *What is your definition of a role model?*

SECTION V: Leadership Opportunities

Leadership roles are offered on the Teen Council. Circle the position you would like to serve as:

President

Vice President

Secretary

Treasurer

Wing Representative

General Council Member

Are you comfortable with public speaking in front of your peers? _____

Are you comfortable with public speaking in front of a large group of adults? _____

What are some of your public speaking experiences, if any? _____

SECTION VI: Signatures

I have prepared this application and certify that it accurately reflects my work,

Signature of Applicant:

Date:

I fully support my teen's application to the New York National Guard Teen Council,

Parent or Legal Guardian Signature:

Date:

Submit all applications by mail, fax or email to:

Keri J. Attanasio
Lead Child and Youth Program Coordinator
New York National Guard
330 Old Niskayuna Rd
Latham, NY 12110
Fax: 518-786-6075
Email: keri.j.attanasio.ctr@mail.mil