



Maui County Youth Council Application

Last Name

First Name

Applicant Information:

Gender/Pronouns: _____

Residency Area: _____

Phone: _____

Email: _____

School: _____

Grade : _____

Questions for Applicant (you may answer on a separate sheet):

Why are you interested in joining the Maui County's Youth Council?

What is something you want to see changed in your community in the next five years?

What are your personal strengths? How do you approach challenges in settings requiring group decision-making or collaboration?

What are your interests/hobbies? Are you involved in any sports or extracurricular activities?

What do you hope to gain from your involvement in the Youth Council?

You may optionally attach up to three statements of support from peers or adults.

Completed applications will be a part of the public record and available for public review.

*Submit completed applications to mauicountyyouthcouncil@gmail.com or mail to %
Councilmember Kelly Takaya King, Kalana O Maui Building, 200 South High Street, 7th
Floor, Wailuku, HI 96793.*

Applications must be received by 4pm on May 1st.

*By signing below, you affirm the above information is correct and that the applicant can commit to twice
monthly meetings for a total of five hours per month for a term ending in September 2022*

Applicant Signature

Date

Parent/Guardian Signature

Date

Parent/Guardian Name

Phone

Email

Parent/Guardian Signature

Date

Parent/Guardian Name

Phone

Email