



# Richmond Youth Council Application

Date of Application:		Check one:	New Appointment: <input type="checkbox"/>
			Re-Appointment: <input type="checkbox"/>
Applicant Name:			
E-mail address:			
Date of Birth:	Age at date of application:	Years living in Richmond:	
Home Address (Street Address, City, and Zip Code):			
Primary Phone:		Secondary Phone (optional):	
Name of School (if applicable):			
Work Experience / Volunteer Experience:			
Organizations, Honors, affiliations:			
References (List Name, Address, Phone Number, and Email Address):			
1)			
2)			
3)			

To the best of my knowledge the information provided is true and correct:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Submit to: City Clerk, 450 Civic Center Plaza, Richmond, CA 94804 OR Email to: [CityClerkDept@ci.richmond.ca.us](mailto:CityClerkDept@ci.richmond.ca.us)

For Office Use Only: New Appointment:  Reappointment:   1st  2<sup>nd</sup>  3rd