



# City of Chino | Teen Advisory Committee

## 2015-16 APPLICATION FOR APPOINTMENT

Thank you for your interest in the City of Chino's Teen Advisory Committee (TAC). For consideration of appointment, submit a completed application before Friday, May 29, 2015, to the Neighborhood Activity Center, 5201 D Street, Chino, CA 91710. If you have any questions, please contact the TAC Coordinator/Liaison at 909.334.3260.

**FULL NAME:** \_\_\_\_\_  
FIRST NAME LAST NAME

**ADDRESS:** \_\_\_\_\_  
STREET APT # CITY ZIP CODE

**TELEPHONE:** (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
HOME OTHER

**Email:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **SCHOOL ATTENDING:** \_\_\_\_\_  
GRADE:  7<sup>th</sup>  8<sup>th</sup>  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup>

*For demographic information, please provide the following information. All applicants will be considered, regardless of their gender, ethnicity, or any other protected class.*

**AGE:** \_\_\_\_\_ **GENDER:**  Male  Female **GRADE POINT AVERAGE:** \_\_\_\_\_  
(current semester)

**ETHNICITY:**  White  Asian or Pacific Islander  Black/African American  
 Latino  Native American  Other \_\_\_\_\_

**DO YOU PARTICIPATE IN ANY EXTRA-CURRICULAR ACTIVITIES OR ARE YOU A MEMBER OF ANOTHER ORGANIZATION?**

Yes, these activities/organizations include:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

No activities at this time; however, I have an interest in my community, because:

\_\_\_\_\_  
\_\_\_\_\_

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**HOW DID YOU HEAR ABOUT THE RECRUITMENT PROCESS FOR THE TEEN ADVISORY COMMITTEE?**

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**WHY DO YOU WANT TO BE PART OF THE TEEN ADVISORY COMMITTEE?**

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Although not required, you may submit additional materials which may be considered for appointment (i.e. resumes, letters of recommendation, acknowledgements, etc.).

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

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**-Official Use Only-**

Date Received: \_\_\_\_\_ Location Received: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Verified GPA: Y / N      Staff verifying: \_\_\_\_\_

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# TAC MEMBER COMMITMENT



The Teen Advisory Committee (TAC) was established by the City of Chino to gain vital input on teen issues, while promoting greater involvement of youth in the community and municipal government. TAC members serve in an advisory capacity to the Community Services Commission by recommending solutions as they relate to youth programs in the City of Chino. **TAC meets at 7:00 p.m. on the first Thursday during the months of September-June in the City Council Chambers.**

As a member of the TAC, we ask that you commit fully to the program during your tenure. Please read the requirements below and consider them before signing this commitment.

***This commitment will include:***

- 1) **Attend** all scheduled TAC meetings.
- 2) **Actively** participate in TAC discussions and projects.
- 3) **Engage** with the Chino community by attending special events, Community Service Commission meetings, and/or City Council meetings.
- 4) **Initiate** meetings with other Chino youth groups to obtain information on issues.
- 5) **Report** news, ideas, or opinions on youth-related issues during TAC meetings.

Through this program as a TAC member, you will experience a deeper understanding of how the City functions and how important youth-related issues can be addressed. You will also learn the proper procedures when conducting official meetings and the roles and responsibilities of certain board positions. **Most importantly, you will be given a golden opportunity to put your thoughts into action and make a difference in your community.**

TAC applicants will be notified and scheduled for the interview process. Selected staff from the Community Services Department and members of the Community Services Commission will be part of the interview panel. TAC applicants will be notified of their application status by Wednesday, July 1.

I, \_\_\_\_\_, (print clearly) am committed to being a Teen Advisory Committee member.

I commit to fully participate in the Teen Advisory Committee by:

1. **Attending** all scheduled TAC meetings.
2. **Actively** participating in TAC discussions and projects.
3. **Engaging** with the Chino community by attending special events, Community Service Commission meetings, and/or City Council meetings.
4. **Initiating** meetings with other Chino youth groups to obtain information on issues.
5. **Reporting** news, ideas, or opinions on youth-related issues during T.A.C. meetings.

I am willing to take on this significant responsibility with great enthusiasm and with the understanding that I will be a representative of the youth in the Chino community.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

I, \_\_\_\_\_, (print clearly) as Parent/Guardian of the above applicant will also support and encourage the requirements of this commitment.

**\* WAIVER AND RELEASE BY APPLICANT(S)  
FOR PARTICIPATION IN A CITY OF CHINO SPONSORED PROGRAM AND/OR  
USE OF A CITY OF CHINO FACILITY**

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In exchange for being permitted to participate in any City of Chino activity and/or use any City of Chino facility, I acknowledge and attest to the fact that:

1. My participation, and that of my child/children/guardians, is voluntary.
2. My participation, and that of my child/children/guardians, potentially can result in injury, death, property damage and other losses.
3. I am legally competent to understand and accept the associated risks.
4. I will not pursue legal action against the City for any matters arising as a result of my participation, and that of my child/children/guardians.
5. I am responsible for payment of all charges associated with my participation, and that of my child/children/guardians, for any damages to City property or other losses of any involved parties.
6. I will defend the City and its representatives against any claims or lawsuits that are a result of my participation, and that of my child/children/guardians.
7. I agree that the City can take photographs and/or film me, and my child/children/guardians, while participating in a City activity and/or at a City facility to be used for promotional purposes; and, further that these will be the sole property of the City.
8. I understand that rates, fees, dates, times, classes, schedule of classes, and instructors established by the City may change at any time without notice.
9. I agree that City fliers and class schedules are not an expressed or implied contract.
10. I agree that the City is not responsible for any damage or loss that may arise from a misunderstanding, error or omission.
11. I understand that the City reserves the right to change or cancel any or all of the participation/use rules at any time.
12. I understand that any individual behaving inappropriately or unsafely will be ejected and denied future participation.

**I am signing a full release of any and all liability against the City of Chino and do so of my own free will.**

Printed name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Address: \_\_\_\_\_

Phone (day): \_\_\_\_\_ Phone (evening): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

Organization (if any): \_\_\_\_\_

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Staff member printed name: \_\_\_\_\_ Title: \_\_\_\_\_

Staff member signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\* To be completed by each adult (18 years of age or older)**