

# Make-A-Wish Greater Bay Area Youth Board



## APPLICATION FOR SEPTEMBER 2024 - MAY 2025 TERM

Please complete the application and email to Rachel at [rfaught@sf.wish.org](mailto:rfaught@sf.wish.org). **Completed applications are due by July 31, 2024.** We will contact you by mid-August. Thank you so much for your consideration!

### PERSONAL INFORMATION

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Applicant's Full Name

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Home Address (including city and ZIP code)

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Home Telephone if applicable

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Student Cell phone

Parent Cell phone

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Student Email Address

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Parent Email Address

### SCHOOL INFORMATION FOR SEPTEMBER 2024 - MAY 2025 SCHOOL YEAR

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Name of School

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School Address (including city and zip code)

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Grade in fall 2024

2023-2024 GPA



Please answer the questions below. Feel free to attach additional sheets as needed.

1. What motivated you to be part of this program?

2. What experience will you bring to the group? Please list any jobs, leadership positions or accomplishments that you think will serve you well in this program.

3. Why is being part of this youth board a priority for you and what would you like to accomplish if you are accepted?

4. We are looking for students who will be active participants in the group, including attending meetings, volunteering at events, helping fundraise and spread awareness for Make-A-Wish. What part of this program are you most excited about?

By printing your name below, you and your parents/guardians are confirming your commitment to make this program a priority. You will be expected to respond in a timely manner to all email communications and to actively participate in meetings.

**PARENTAL / LEGAL GUARDIAN Permission:**

I have reviewed the above application and Youth Board. fact sheet and understand the requirements of Youth Board members.

\_\_\_\_\_  
Parent/Guardian, Printed Name Date

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Parent/Guardian, Printed Name Date

\_\_\_\_\_  
Student, Printed Name Date

