

YOUTH COUNCIL APPLICATION

SALINAS VALLEY RECYCLES



Please Keep this page for your Reference

Youth Council Dates for 2025-2026

Monday, July 27, 2026 - Training Day 1- 11:30AM - 6:30PM

5:30 - 6:30PM will be Parent Meeting & Dinner

Monday -Zoom Meetings

7:30 - 8:30PM

August 3

September 14

October 5

November 2

December 7

January 11

February 1

March 1

April 4

May 3

Saturday - In Person Meetings

9:00AM - 12:00PM (unless noted)

August 15 -Training Day 2- 9:00 - 3:00

September 12 - Training Day 3- 9:00 - 3:00

October 17 - Community Service 9:00 - 2:00

November 7- Video Shoot 9:00 - 2:00

November 14 Community Service 9:00 - 2:00

December 12

January 9

February 13

March 13

April - Community Service

May 8 - Youth Council Wrap Up Lunch

SVR Board Meetings

6:00 - 7:30PM

117 Fourth St. Gonzales CA 93926

Thursday, October 15, 2027 - Presentation of YC Members to the Board

Thursday, May 20, 2027 - Wrap up presentations & Senior YC Honor Cord Presentations

Community Service Projects

October 17, 2026 - Gonzales Community Cleanup 8:00AM - 2:00PM

November 14, 2026 - America Recycles Day Activity

April 25, 2027 - Salinas Earth Day Project - TBD

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Applicant Information

First & Last Name _____

Email Address You Check Frequently _____

Mailing Address _____ City _____ Zip _____

Phone # _____ Text YES NO

High School _____ Upcoming Grade _____

Parent/Guardian Information

Parent/Guardian 1

First & Last Name _____ Relation _____

Phone # _____ Text YES NO

Email Address _____

Parent/Guardian 2 (Optional)

First & Last Name _____ Relation _____

Phone # _____ Text YES NO

Email Address _____

Emergency Contact

(other than parent/guardians listed above)

First & Last Name _____ Relation _____

Phone # _____ Text YES NO

Email Address _____

References

Please provide email addresses for two teachers and two personal references. We will email them a link for a reference survey to take online for you. Please let your references know to look out for these emails.

Teacher #1 Name _____ Email _____

Teacher # 2 Name _____ Email _____

Reference #1 Name _____ Email _____

Reference #2 Name _____ Email _____

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Commitments

Read the following qualifications for appointment carefully and indicate that you meet and/or agree to each item by initialing beside each statement.

_____ I will maintain a good attendance record of 80% or more Youth Council functions

_____ I will attend all meetings required of my position and participate as a team member

_____ I am aware that the members are the selected young leaders of SVR and represent the youth in many community functions

_____ I will share equally in all the duties of the Council, which include attending and actively participating in the council

_____ I have looked over the dates provided for the Youth Council and will, to the best of my ability, keep these dates free from other obligations

_____ I will communicate in a timely manner if I am unable to attend a meeting.

_____ I will check my SVR YC email regularly for information pertaining to YC matters and respond in a timely and professional manner

_____ I will use my SVR YC email address for YC business related matters only

_____ During Zoom Meetings, I will have my camera on and will actively engage and fully participate in discussions and activities

Please tell us about any date conflicts you may have.

Applicant Signature

By signing below, I am submitting my application to serve as a Youth Council member. I understand that, if selected as a Youth Council member, I am committing to serve for the entire school year from June thru April. I understand that serving on the Salinas Valley Recycles Youth Council is a commitment and I will take the commitment seriously.

Applicant Signature _____ Date: _____

Parent/Guardian Signature

By signing below, I am allowing my child to submit their application to serve on the Salinas Valley Recycles Youth Council. I understand that this is a serious commitment that will last from June 2025 to April 2026. I will do my best to support my child in honoring their commitment.

Parent/Guardian Signature _____ Date: _____

email completed application to sarapb@svswa.org

PERSONAL REFERENCE

This information will remain confidential. Upon completion, please return to Sara at Salinas Valley Recycles @
Sarapb@svswa.org

NAME OF APPLICANT: _____

NAME OF REFERENCE: _____

**Please give this applicant a score from one to five in the following areas.
One being the lowest score and 5 being the highest.**

Willingness to Learn 1 2 3 4 5

Ability to affect Change

Out of the box thinker

Inclusiveness of others

Please answer the following questions:

1. Do you feel like this applicant is over-committed? Yes No
2. Does this applicant follow through on tasks? Yes No
3. Does this applicant show a can-do attitude? Yes No

**Please read the following Mission Statement and then let us know what kind of fit you
think this applicant would be to a program like ours/ (Please be honest)**

SVR Youth Council Mission Statement:

The Salinas Valley Recycles Youth Council empowers young leaders to drive environmental change through advocacy, education, and action. By amplifying youth voices, fostering sustainability initiatives, and promoting waste reduction, we work toward a future without landfills. Together, we inspire our communities to rethink waste and embrace sustainable solutions for generations to come.

Goals:

1. Youth Advocacy & Leadership – Serve as a voice for teens on sustainability and waste reduction issues in the Salinas Valley.
2. Service Learning & Community Impact – Lead and support hands-on environmental service projects that create meaningful change.
3. Education & Awareness – Facilitate on-campus and community-based environmental education to promote responsible waste management.
4. Policy Engagement – Learn about environmental policies and advocate for sustainable waste solutions at local and regional levels.
5. Collaboration & Growth – Partner with local organizations, schools, and government agencies to develop leadership skills and expand our impact.

After Reading Our Mission Statement, How do you see this applicant fitting in with our goals?

SIGNATURE: _____ DATE: _____