



UNITED STATES CONGRESSMAN VAN TAYLOR CONGRESSIONAL YOUTH ADVISORY COUNCIL

2020 - 2021 Congressional Youth Advisory Council Application Instructions

About the Congressional Youth Advisory Council

The Congressional Youth Advisory Council is a leadership opportunity for high school students in Texas' Third Congressional District to participate in an interactive learning experience and develop leadership skills.

Participation in the Congressional Youth Advisory Council offers students an unmatched opportunity to learn about the federal government, discuss public policy, and interact with their federal representative and congressional staff while serving their community.

Through the program, students will develop critical thinking and problem-solving skills by assessing the role of the federal government as it relates to issues within Texas' Third Congressional District while strengthening their public speaking and writing skills.

Eligibility Requirements

- Must currently reside in the Third Congressional District of Texas. To verify residence, visit www.house.gov and enter in applicant's zip code in the box entitled "Find Your Representative".
- Must be enrolled in 9th, 10th, 11th, or 12th grade
- Must be able to attend each of the six separate program events
Fall events will take place on Saturday, September 26, Saturday, October 24, and Saturday, November 7. Spring event dates will be announced in December 2020. Please note, some meetings may be held virtually due to COVID-19 restrictions. All meeting dates are subject to possible changes in the Congressional calendar

Application Process

In order to be considered, completed applications, including all materials detailed below, must be returned in its entirety to Congressman Taylor's Collin County office no later than **September 8, 2020 by 5:00 PM.**

Due to the competitive nature of the program, Congressman Taylor's office is unable to review incomplete or late applications. Complete applications must be submitted directly to:

U.S. Congressman Van Taylor
5600 Tennyson Parkway; Suite 275
Plano, TX 75024

Application Checklist

- Application:** Completed in its entirety
- Personal Essay:** Students must submit two 150-word essays on the following topics: (1) Describe an experience you have had, position you have held, or goal you have accomplished that has prepared you to serve on the CYAC; and (2) Why are you passionate about serving your community and country?
- Current Photo of Applicant:** For identification purposes only
- Resume:** Detailing high school activities, including elected or appointed leadership positions, athletic activities, volunteer experiences, etc.
- Letters of Recommendation:** (2) accounting for applicants' character and interest in public service
 - Letters should be sealed by the recommender and signed across the seal. These letters should not be written by immediate family members.

2020 - 2021 Congressional Youth Advisory Council Application

INFORMATION			
<i>Please complete electronically or print in pen.</i>			
Last Name:	First:	Middle:	Email Address:
Street Address:		P.O. Box:	Home Phone Number:
City:	State: TX	Zip:	Cell Phone Number:
Date of Birth:	Grade for 2020/2021 School Year:	<i>If over 18</i> , registered to vote: Yes No	
Name of High School:		ISD:	Cumulative GPA: Scale:
Have you previously applied to the Congressional Youth Advisory Council?		Yes No	<i>If yes</i> , date:
Have you previously served on the Congressional Youth Advisory Council?		Yes No	<i>If yes</i> , date:
Has a family member previously served on the Congressional Youth Advisory Council?		Yes No	<i>If yes</i> , date:
List all clubs and activities, including any leadership positions:			
If selected, what topics would you like to discuss at 2020-2021 CYAC meetings?			
Do you have any relatives who are in public service, serve on public boards/commissions, or are/were in the military? <i>(if yes please list)</i>			

Certification of Application

I, _____, certify that the information on this application and any additional material submitted are true and complete to the best of my knowledge. I have reviewed the fall meeting dates and am able to attend all meetings at this time.

Applicant Signature: _____ Date: _____

I, _____, do hereby give my consent for my child to participate in the Congressional Youth Advisory Council and understand the time commitment involved for this program. (if applicant is a minor)

Parent/Guardian Signature: _____ Date: _____

Complete applications must be submitted to Congressman Van Taylor's Collin County office no later than September 8, 2020 by 5:00 PM via email to Emma.Mcilheran@mail.house.gov or mailed to:

**U.S. Congressman Van Taylor
5600 Tennyson Parkway; Suite 275
Plano, TX 75024**



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2020 - 2021 Congressional Youth Advisory Council Letter of Commitment

If you are selected as a participant for the 2020 – 2021 CYAC program, the commitments required to graduate are full attendance, completion of assignment, and participating in activities (please initial verifying the ability to meet each commitment):

- Attend ALL meetings, including:
 - First Meeting: Saturday, September 26, 2020*
 - Second Meeting: Saturday, October 24, 2020*
 - Third Meeting: Tuesday, November 7, 2020*
 - Three Spring meeting dates which will be announced in December 2020
- Complete assignments and submit on time
- Frequently check your email and participate in email activities as necessary

**Note: Some meetings may be held virtually due to COVID-19 restrictions. All meeting dates are subject to possible changes in the Congressional calendar*

Participant Name: _____

Participant Signature: _____ Date: _____



Liability Release Form

To: Office of Congressman Van Taylor

Event or Activity: Congressional Youth Advisory Council & related activities

I understand that participation in the above event or activity could include actions or tasks which might be hazardous to the participant named above.

By signing below, I assume any risk of harm or injury which might occur to the participant due to his/her participation in the event or activity. I release the organization or business names above from all liability, costs, and damages that might arise from participation in the above named event or activity.

If the participant is a minor, I agree that the minor has my consent to participate in the event. I further provide my consent for the organization or business named above to seek emergency treatment for the minor if necessary. I agree to accept financial responsibility for the costs related to this emergency treatment.

Participant (please print): _____

Signature of participant: _____ Date: _____

Emergency contact: _____ Relation: _____

Contact's phone number: _____

Contact's email: _____

If participant is a minor (under 18)

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date: _____