Colorado School Safety Resource Center (CSSRC)

Youth Engaged for School Safety - YES²

Advisory Council Application

Name:			Age:	
		Email Address:		
	me Phone:		Cell Phone:	
Pa	rent Name(s):	Email Address:	Cell Phone:	
Scl	nool Currently Attending:		Current Grade:	
1.	If you could describe your	self in three words, what would t	they be?	
2.	What are some important environments?	issues you think students are fac	cing regarding school safety and positi	ve learning
3.	July of 2020, two meeting	s in the fall of 2020 (date and tim at least 3 of the 4 events. Attend	nttend a team-building orientation to be the TBD), and one meeting on Wedneso lance may be via technology. Are you a	lay, April 13, 2021.
4.	What clubs, activities, gro position(s) you have held.	-	with in the last two years? (Please not	te any leadership
5.	-	•	w would you be an asset to the team? es would you have working as part of	_
6.	write a short response (no	•	reating and implementing a project at what school safety topic on which you project ideas?	•

7.	Have you ever had any disciplinary action taken as a result of your behavior in school? Have you ever been suspended? Have you ever been accused or charged with a crime, either in the juvenile or adult systems? If you answered yes to any of the above questions, please explain the circumstances regarding the incident(s). Your disciplinary or criminal history will not automatically disqualify you from serving on YES ² .