

**REGIONAL YOUTH COUNCIL**  
Nomination Form for Youth and Adults  
Christian Church of Northern California-Nevada

**PERSONAL INFORMATION**

Name \_\_\_\_\_ Female \_\_\_\_\_ Male \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Adult \_\_\_\_\_  
City, Zip \_\_\_\_\_ Current Grade \_\_\_\_\_ Class of \_\_\_\_\_  
Email address \_\_\_\_\_ Birth date \_\_\_\_\_

**CHURCH INVOLVEMENT**

Name of Church \_\_\_\_\_ Member? \_\_\_Yes \_\_\_No  
Pastor's Name \_\_\_\_\_  
Present/Past Positions of Leadership held in church and/or youth group \_\_\_\_\_

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**Please include a list of activities, mission opportunities, and youth programming in which you have participated through school and church.**

**PERSONAL RESPONSE** (Please type your response and do not attach your name. We evaluate these responses anonymously. Response should not be more than three pages total.)

- A. Tell us why you want to apply for RYC.
- B. What talents, gifts and leadership skills do you think you would bring to RYC?
- C. Describe your leadership style.
- D. What is your dream for Regional Youth Council?
- E. Write a paragraph about who you are and tell us about your personal faith journey.
- F. If you could have any super-human power, what would it be? Why would you choose it?

**FULFILLING THE SELECTION PROCESS**

All persons wishing to apply must fill out a nomination form and ask two persons to submit letters of recommendation on their behalf by the deadline (**March 11, 2011**). Letters of recommendation should be from (1) your pastor and (2) one other person who knows you and your activity in church life. For adult applicants, one of the letters should be from a youth. (Courtesy and convenience suggest that nominees give their letter-writers stamped and addressed envelopes.) **LATE APPLICATIONS WILL NOT BE CONSIDERED.**

**COVENANT AGREEMENT**

I have read and understand the Guidelines, Covenant, and Job Descriptions for the CCNC-N Regional Youth Council and agree to participate as fully as possible in this ministry of our regional church if I am selected. I have identified at least one supportive adult in my life that can help me to attend meetings and who will encourage me in my ministry.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Signature of Parent/ Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please send nomination forms, personal responses, and letters of recommendation to:  
Carl Cordes, CCNC-N, 9260 Alcosta Blvd., C-18, San Ramon, CA 94583-4143