

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

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 RYC?
- 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 (**3rd Saturday of March**). Letters of recommendation should be from your pastor and one from 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.) Letters can be either mailed or emailed to the region. LATE APPLICATIONS WILL NOT BE CONSIDERED.

APPLICANT COVENANT AGREEMENT

I have read and understand the attached Guidelines 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.

Applicant Signature _____ Date _____

PARENT OR GUARDIAN COVENANT AGREEMENT

I have read and understand the attached Guidelines for the CCNC-N Regional Youth Council and agree to help my child participate as fully as possible in this ministry of our regional church if he/she is selected.

Signature of Parent/ Guardian _____ Date _____

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