



**Borough of Chalfont
JUNIOR COUNCILPERSON/
YOUTH COMMITTEE
APPLICATION**

NAME : _____

ADDRESS : _____

TELEPHONE : _____ **DATE:** _____

E-MAIL ADDRESS: _____

_____ grade for the 2013-2014 school year

_____ years as a Chalfont Borough resident

Why do you think local government is important?

What is your favorite thing about Chalfont Borough?

What is one thing you would like to improve upon in Chalfont Borough?

Briefly describe why you would like to be considered for the Junior Councilperson position:

If you are not chosen for Junior Councilperson, would you like to be appointed to the Chalfont Borough Youth Committee? _____ YES _____ NO

***If under 18, signature of parent or legal guardian** _____