

Committee Membership Application - Youth

Public Information: (The data on this page is public and, therefore, available to the public.)					
Name				County	
Home Address			City	ST	Zip
Cell Phone	Other Pho	one Number to Reach You			
Email address (if you check it at least every day or so)	·				
Do you use Facebook or any other social media?					
School You Attend (if applicable)		Grade (if applicable)			

Please feel free to attach additional sheets to your responses		
Why are you interested in participating on	a WIB committee?	?
What unique skills, talents, or relevant exp	erience do you thin	ink you would bring to the committee?
	·	
What topics or problems do you think are t	he most important	t to youth in our community and Ramsey County?
This committee typically meets once every other month from 3-4 p.m. Does this meeting time work for you? If not, why?		
YES	NO	UNSURE

Email, mail or fax your Membership Application to:	
Workforce Innovation Board of Ramsey County 121 7th Place East Saint Paul, MN 55101	Rebecca.milbrandt@co.ramsey.mn.us Phone: 651-266-6004

Optional:	In an attempt to ensure membership representation reflects the makeup of our community, knowledge of the following information is helpful. However, completion of this information is voluntary.				
	White (Caucas	ian)	Hispanic		
	Black		Asian or Pacific Islander		
	American India	n or Alaskan Eskimo	Other:		
	Male	Female			
	Disabled	If special accommodation	If special accommodations are needed, please specify:		

The information on this application will be used to evaluate and select members of WIB committees. Applicants may refuse to supply the requested information. However, except for optional voluntary information, the failure to complete the application may result in it being discarded. This data may be reviewed and used by Ramsey County and City of Saint Paul staff.

Thank you for your interest!

For Office Use Only				
Date Received	Date of Appointment	Committee Assignment		