

Application for Eastern Oklahoma Presbytery Youth Council

Youth Council Mission:

The Eastern Oklahoma Presbytery Youth Council is a group of youth and adults called by God who work together to provide opportunities to connect youth and youth leaders while encouraging spiritual growth and involvement in the mission and the life of the Church.

Youth and Adults of EOP Youth Council Will Be Expected To:

1. Attend and participate in stated Youth Council meetings.
2. Actively help plan and implement events hosted by Youth Council.
3. Represent their home church and EOP in a positive, Christian manner.

Requirements for Members:

1. Must be a confirmed member of PCUSA congregation.
2. Must be active in the church you represent.
3. Youth members must be in high school for the 2009-2010 school year.
4. Must be able to serve the term of September 2009 to August 2010.
5. Adults must be 21 or older.

Have your pastor/youth worker complete and return recommendation form.

Your attendance at Youth Council meetings is very important. You may contact Jennifer Coulter if you have a true conflict on this day to discuss other options.

Name: _____

Address: _____

Email: _____

Phone number: _____

Church: _____

Name and email of youth contact at your church:

Please answer the following questions on a separate sheet of paper:

1. Why do you want to serve on EOP Youth Council and how do you feel you will contribute?
2. How have you been involved in your home church?
3. What extra-curricular activities are you involved in?
4. Write a personal statement of your faith.

Application must be returned to Jennifer Coulter.

Email applications to yellowangelwings@gmail.com

Recommendation Form for Youth Applicants to EOP Youth Council

Thank you for taking the time to complete this recommendation form on behalf of a youth member of your church. Please be honest in your responses as all recommendation forms will be confidential.

Recommendations should be completed and returned to Jennifer Coulter by September 1, 2009. Please email completed forms to yellowangelwings@gmail.com.

Name of youth applicant: _____

Name of person completing recommendation:

Position of person completing recommendation:

Contact email: _____

Youth Council members are expected to attend and participate in 4 to 5 meetings as well as actively be involved in 2 to 4 youth events. Please answer the following questions with this in mind.

How long have you known the applicant and in what capacity?

Will the participant be an active and positive member of Youth Council?

How has the applicant been active in your church?

What characteristics, skills, etc., will the applicant bring to Youth Council?