



Sheriff Chip W. Simmons

ESCAMBIA COUNTY SHERIFF'S OFFICE

COURTESY

INTEGRITY

PROFESSIONALISM



Sheriff Youth Advisory Council (SYAC)

SYAC Outline:

Sheriff's Youth Attendance/Response Rules That you will, over the course of 12 months, do at least the following:

- Attend the Opening Retreat (9 hours) **MANDATORY**
- Attend 2 Open Forums with the sheriff (1 hour each)
- Attend 6 Community service projects (2–6 hours each)
- Attend 6 Leadership 101 sessions (3-4 hours each)
- Attend 2 of the 4 Sheriff's Youth Leadership Council Quarterly Special Presentations (2 hours each)
- Attend Introduction to Law Enforcement (1 hour) **MANDATORY**
 - Be on time for all events. Arriving late for 2 events will result in a warning.
 - Call or email if you are unable to attend an event that you have indicated you will attend. Failure to attend an event without a call or email will result in a warning.
 - To receive an invitation to attend the closing luncheon, you must have accumulated at least 60 hours and met all the individual event requirements.



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Sheriff's Youth Advisory Council (SYAC)

Youth Council Application

The vision for the SYAC is to empower caring youth dedicated to personal development and servant leadership. If you are interested in applying for membership to the council, please complete the following application. Applicants MUST be a county resident and be in grades 11th 12th grade. Please type or print clearly in blue or black ink. You may attach additional sheets if necessary: ALL information must be completed to be considered for the SYAC.

Name: _____ Age: _____

School: _____ Grade: _____

Home Address: _____ Zip: _____

Telephone: _____ Cell Phone: _____

E-Mail: _____

Parent/Guardian: _____

Optional Information: _____

_____ Gender: ___ Female ___ Male Birth Date _____ Please

check all that apply: ___ I have transportation to get to Youth Council meetings/events. ___ I

initiated my interested in this program. ___ I was asked to apply for this position. By whom?

_____ Position: _____

Organization: _____

Why do you want to serve as a member of the Sheriff's Youth Advisory Council? (feel free to add a sheet of paper)

What are the three most important issues to you, your friends and your family concerning your neighborhood?

1. _____

2. _____

3. _____

Please list any other activities you will be involved in during the school year. Include employment, sports, community, school and religious groups.

What personal skills and characteristics do you possess that would make you a good representative?

If you could bring one thing to this community or change one thing, what would it be?

Are you willing to attend the meetings, events and activities of the Youth Advisory Council for one year and commit to making a difference in our city? Yes ___ No ___

Are you interested in community service points for this project? Yes ___ No ___

Please list two adult references (non-relatives) with phone numbers. You must also attach letters of recommendation from these individuals. The letters must be no more than one page in length and typed.

Please include one letter from your school principal or other school-based personnel and one letter from a community member who is familiar with you. 1.

_____ 2.

I have read and understand the commitment required for the Sheriff's Youth Advisory Council.

I also realize the importance of teamwork and cooperation and I am willing to make this commitment.

Student Signature: _____ Date:

Parent/Legal Guardian Permission: I give my permission for _____ to

seek the position of representative on the Sheriff's Youth Advisory Council.

Signature of Parent/Guardian: _____ Date: _____

Emergency Contact: _____

Relationship to Youth: _____

Emergency Telephone Number: _____

Emergency Cell Number: _____

Thank you!

Download and complete form prior selecting Submit.