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**APPLICATION FORM: Youth Involvement Project**

Complete the form by 30 August to register your interest in joining YIP. Return your form to:

Online: [www.participate.boprc.govt.nz/youth-involvement-project](http://www.participate.boprc.govt.nz/youth-involvement-project)

Email: stephanie.macdonald@boprc.govt.nz

By Mail: Freepost 122076
Attn: Community Engagement Team
Bay of Plenty Regional Council
PO Box 364
Whakatāne 3158

Or delivered to any Bay of Plenty Regional Council office

1. **Your full name** *(Required)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Your age** *(Required)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the name and phone number (below) of your guardian if under 18

Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guardian Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Gender** *(Circle your answer)*
Male Female Other/ Prefer not to say
2. **What ethnic group(s) do you identify as?** *(Circle your answer)*

Māori

Pākehā/NZ European

Asian

Pacific peoples

 MELAA *(Middle Eastern/Latin American/African)*

 Other *(please specify)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
*If you identify as Māori, what’s your Iwi affiliation? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Contact Information** *(Required)*

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Where do you live?** *(Circle your answer)*

Tauranga City

 Rotorua District

 Offshore Islands

 Taupō District

 Western Bay of Plenty

 Ōpōtiki District

 Kawerau District

 Whakatāne District

 Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Are you currently...***(Circle your answer)*

Studying (school or tertiary)? If so, name of school or provider \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Working?

Caring for whānau?

Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Which areas of Regional Council's work are most important to you?**

Rank from most important (1) to least (16)

* Air quality\_\_\_
* Civil Defence/Emergency Management \_\_\_
* Climate change \_\_\_
* Coasts, harbours and oceans \_\_\_
* Flood management \_\_\_
* Fresh water \_\_\_
* Geothermal \_\_\_
* Lakes \_\_\_
* Land management \_\_\_
* Pests and Biosecurity\_\_\_
* Pollution \_\_\_
* Public transport \_\_\_
* Regional economic development \_\_\_
* Resource management\_\_\_
* Volunteering \_\_\_
* Working with iwi \_\_\_
1. **Participation in YIP Events**

 I am able to attend the first YIP noho marae event on 16-17 October 

I am able to attend the second YIP noho marae event on 29-30 January 

We're aiming for the YIP group will aim to meet monthly, at times that suit the group. When would suit you best?

Weekday afternoons (i.e. 3:30pm-5:30pm)
 Weekday Evenings (i.e. 6pm-8pm)

 Weekend mornings

 Weekend afternoons

 Other (please specify)

1. **Members of the YIP group are expected to search out and share the perspectives and views of local young people. How do you think you could do this?**

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1. **Can you share an example of how you are a positive role model for youth and show a can-do attitude?**

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1. **Tell us 3 interesting things about yourself (what makes you unique?)**

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1. **What are the three things you value most in life?**

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1. **If you could have a superpower, what would it be and why?**

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1. **How did you hear about the Youth Involvement Project?**

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