



## **YOUTH ADVISORY BOARD**

### **AutismOklahoma's Mission and Vision**

Investing together to grow, learn, and serve the families of Oklahoma affected by autism. We bring hope and empowerment as we help Oklahoma become more autism-friendly and aware.

We do this in three ways, by...

- Helping individuals reach their full potential
  - Helping families thrive, and
- Helping communities understand and embrace differences

### **Primary Functions**

- To serve as ambassadors to AutismOklahoma and the autism community
- Plan, execute and host one fundraising event for AutismOklahoma each year
- Plan, execute and host one awareness event for AutismOklahoma each year
- Recruit a PieceWalk team from each representative's school

### **Requirements**

- Be enrolled in High School for the 2018 / 2019 academic year
- Be between the ages of 14 and 19
- Have a current GPA of 2.75 or higher
- Complete the AutismOklahoma Youth Board application
- Provide two letters of reference; one from a teacher or school administrator, and one from a community representative to whom you are not related
- Attend one meeting per month (or as scheduled)
- Attend the opening retreat



## Youth Advisory Board Application

Full Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name of School \_\_\_\_\_

Grade Entering 2018/2019 Academic Year \_\_\_\_\_

Parent / Guardian Full Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### List Activities / Groups with Which You Are Involved

☐ School \_\_\_\_\_

☐ Place of Worship \_\_\_\_\_

☐ Community \_\_\_\_\_

### List Any Leadership Roles You Hold

☐ School \_\_\_\_\_

☐ Place of Worship \_\_\_\_\_

☐ Community \_\_\_\_\_

### List Three Strengths You Will Bring

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

## Tell Us Why You Would Like to Serve on AutismOklahoma's Youth Board

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Completed and signed applications along with two letters of reference are due by June 10, 2018

Mail to        Stacey Weddington  
                 AutismOklahoma  
                 13919-B North May Avenue  
                 Oklahoma City, OK 73134

Email to        [Stacey.Weddington@AutismOklahoma.org](mailto:Stacey.Weddington@AutismOklahoma.org)

Questions      Stacey Weddington 830-5948

*I understand that submitting this application is not a guarantee of acceptance.  
I further understand the requirements of service should I be selected to the board.*

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Thank you for submitting your application, you will be notified by July 1, 2018.