

Discovery Center Youth Council Application



Please fill out the information below and attach your personal essay to the back. You may bring your completed application to the Discovery Center in person OR you are welcome to mail it to

Discovery Center
ATTN: Brooke Fitzwater
502 SE Broad St.
Murfreesboro, TN 37130

Personal Information

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Birthday (MM/DD/YY): _____

School, Grade, County: _____

Please list any allergies, medical conditions or special needs:

Parent/Guardian Information

Name: _____

Phone Number: _____

Email Address: _____

Please provide your initials as consent to the following membership criteria:

- _____ I will attend all five meetings (1 meeting per month *subject to change* February-June)
- _____ I am aware that I am required volunteer for a minimum of 6 hours per month
- _____ I will participate in group discussions and research
- _____ I will take part in the presentation to the Board of Directors

You will need **two (2) letters of recommendation** from people who know you in a *professional or academic* capacity. At least one (1) of your references must be a teacher. Family members and friends will *not* be considered reliable references. List your two references below and we will contact them for your letter. Please ask your references if they are available to write your letters before submitting your application.

Reference 1 Name: _____

Email: _____

Reference 2 Name: _____

Email: _____

Please attach a one (1) page typed essay that addresses the following prompt:

Why do you believe that you are an ideal candidate for the Youth Council? How do you hope to benefit the Discovery Center through your involvement? How will this position aid your personal development? What about STEAM (Science Technology Engineering Art and Mathematics) excites you?