



## Orange County Transportation Authority 2015-2016 Teen Council Application Form

The OCTA Teen Council is sponsored by the Orange County Transportation Authority (OCTA). Teen Council members will provide insight into public transportation issues and possibilities, while working together with their fellow council members to make a positive impact/contribution towards public transportation in Orange County today.

The OCTA Teen Council is a service-oriented group of students that requires participation in meetings and activities throughout the year. Meetings are held once a month during the regular school year, beginning in September and ending in August. The meeting schedule will be developed with input from the selected members of the Council. Most meetings will be held in a central location such as OCTA's administration building in Orange. Additional meetings and activities may be scheduled throughout the school year.

### Eligibility Requirements

In order to be eligible to serve on the OCTA Teen Council, applicants must meet the following requirements:

- Age 13 to 18 as of September 1, 2015 and
- A resident of Orange County and
- Entering grades 9 – 12 at a public or private school located in Orange County.

**The deadline for applications is July 31, 2015.** Membership selection will be made before August 31, by which all applicants will receive a letter of status. Membership in Teen Council is competitive.

*Please print.*

Name (first, last) \_\_\_\_\_

Age \_\_\_\_\_ Grade for the 2015-2016 school year \_\_\_\_\_

School \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home phone # \_\_\_\_\_ Cell phone # \_\_\_\_\_

Email address \_\_\_\_\_

How did you find out about the OCTA Teen Council? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List activities you have been involved in during the last two years at school, church, in the community, as a volunteer, or at work. Include any leadership roles you have held.

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Are you available for monthly evening meetings and periodic weekend functions?

☐ Yes

☐ No

If not, please indicate why: \_\_\_\_\_

Were you referred to Teen Council by a current Teen Council member?

☐ Yes

☐ No

If yes, who? \_\_\_\_\_

**References:**

The references you list should be adults who are closely associated with your abilities and qualifications to serve on the Teen Council, such as teachers, principals, guidance counselors, youth group leaders, coaches, employment or volunteer supervisors, etc. Do not list family members.

1) Name \_\_\_\_\_ Phone # \_\_\_\_\_

Relationship \_\_\_\_\_

2) Name \_\_\_\_\_ Phone # \_\_\_\_\_

Relationship \_\_\_\_\_

3) Name \_\_\_\_\_ Phone # \_\_\_\_\_

Relationship \_\_\_\_\_

**In addition to this form, please provide the following:**

- ◆ On a separate piece of paper describe:
  - Why you are interested in the OCTA Teen Council.
  - What you would like to learn from being on the OCTA Teen Council.
  - Why you should be selected as a member of the OCTA Teen Council.
- ◆ Please submit separately **one letter of recommendation** from someone who is closely associated with your abilities and qualifications to serve on the Teen Council, such as teachers, principals, guidance counselors, etc. The person referencing needs to refer to your leadership potential, personal character, and ability to balance school and participation in the Teen Council. **This letter may be sent via regular mail to the address listed below or via email to [ltompson@octa.net](mailto:ltompson@octa.net).**

***Failure to include a letter of recommendation will negate an interview or selection for the 2015-2016 Teen Council.***

**Student:** I have read and understand the commitment required by the OCTA Teen Council. I understand membership is competitive and if selected, I am able to make this commitment for the current school year.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

**Parent/Guardian:** I give permission for to seek the position of OCTA Teen Council member. I will support his/her attendance at monthly meetings and participation in OCTA Teen Council activities and projects.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

Mail your completed application and letter of recommendation to:

**OCTA Teen Council  
Attn: Lauren Thompson  
Orange County Transportation Authority  
P.O. Box 14184  
Orange, CA 92863**

Alternatively, your signed application can be scanned and submitted via email to **[ltompson@octa.net](mailto:ltompson@octa.net)**.

For further information contact Lauren Thompson by email at [ltompson@octa.net](mailto:ltompson@octa.net), or by phone at (714) 560-5349.