

2022-2023 Membership Application

Wichita Family Crisis Center

Youth Advisory Council

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WFCC Youth Advisory Council Membership Criteria and Application

What is the WFCC Youth Advisory Council?

Wichita Family Crisis Center (“WFCC”) is excited to provide leadership opportunities for local high school students to become more actively involved in the prevention, education, and awareness of intimate partner violence and human trafficking throughout our community.

The WFCC Youth Advisory Council (“YAC”) was established to provide local youth with the opportunity to develop their advocacy skills, their understanding on the issues of intimate partner and sexual violence, and human trafficking within our community. *WFCC YAC will work together to create awareness opportunities and events to support and assist the work of the WFCC on behalf of survivors. Through their involvement with the Advisory Council, students will be exposed to, and learn from professionals working with victims of, and the issues and causes domestic and sexual violence, and human trafficking efforts at all levels including local, state and federal.*

WFCC YAC is composed of high school students from Sedgwick, Sumner, and Cowley counties. Members have opportunities to develop their leadership skills through community engagement activities, volunteer and academic projects, to advocate for survivors, and to represent the youth in our community taking a stand against intimate partner violence, sexual violence, and human trafficking.

Qualifications

Members must have the following qualifications:

- Currently a student in grades 9-12
- Must live in Sedgwick, Sumner, or Cowley counties
- Have a passion for advocating for victims of intimate partner and sexual violence, and human trafficking
- Be a leader among your peers, wanting to educate others on domestic and sexual violence, and human trafficking
- Be flexible, open minded, respectful, and hard working

How to Apply

1. Complete (please print or type) and sign this application.
2. Obtain your parent's or legal guardian's signature, giving you permission to participate on the Youth Advisory Council (if you are under 18).
3. Attach one letter of recommendation. Cannot be from a family member.
4. Submit your application by using one of the following methods:

Mail or deliver the application to:

1. Wichita Family Crisis Center
Administrative Office
C/O Volunteer Coordinator
1111 N St. Francis
Wichita, KS 67214

2. Email a signed copy of the application to kdavidson@wichitafamilycrisiscenter.org
In the subject line, please type, "Youth Advisory Council Application"
Send only PDFs or Word documents, no image files or pictures of the application.

Selection Criteria

1. The youth's interest in serving on the Council.
2. Good standing with the law.
3. Pass a background check.
4. The student's desire to assist with community awareness on domestic and sexual violence.
5. Feedback from the student's letter of recommendation reference.
6. An interview with the selection committee.

Requirements

1. Attend monthly Youth Advisory Council meeting (allowed to miss up to 3/calendar year)
2. Attend a quarterly training hosted by WFCC or other community partners on intimate partner violence, sexual violence, human trafficking, trauma, advocacy, self-care, or other related topics.
3. Participate in a minimum of 1 outreach event per semester. This may include but is not limited to: leading a volunteer day, hosting a donation drive, conducting a training, or accompanying our outreach team at a booth/fair event.
 1. Outreach events can be held at your school, place of worship, club meeting, or any kind of communal place/organization, etc.

Personal Information

Name: _____ Age: _____

Date of Birth: _____ School: _____

Grade Level for the **2022-2023** School Year: *Freshman* | *Sophomore* | *Junior* | *Senior*

Cell Phone: _____ Home Phone: _____ Best Way to Reach You: _____

E-mail Address: _____

Do you speak a foreign language fluently? Yes No If yes, which language(s)? _____

Home Address: _____

City: _____ State: _____ Zip: _____

County (please circle one): Sedgwick Sumner Cowley

Please list any specific talents, skills, hobbies, etc. that you believe might be beneficial to YAC:

List all of the major extracurricular activities that you are involved in outside of your academic program:

Essay Responses

Please respond thoroughly to the following questions on the lines provided below.

1) What does the term “advocacy” mean to you?

2) If you could educate your community on just one fact about intimate partner and sexual violence, and/or human trafficking, what would it be, and why?

3) What are your reasons for wanting to be a member of YAC? How do you hope to benefit from the experience?

4) In what ways have you shown leadership?

5) **Short Essay:** What vision do you have for the YAC? And, what role do you see yourself playing within the YAC and within our community? Please use the space provided below for your short essay.

Additional Information

- 6) **Recommendation Letter**: Include one (1) letter of recommendation from a non-family member adult you have worked with in school or non-school activities (e.g. teacher, counselor, coach, supervisor, youth leader, etc.). Ask the letter writer to include their name, phone number, and email address in the letter.
- 8) **Meeting Availability**: Council meetings are held on the 2nd Monday of each month from 6:00-7:30 PM. Each member is allowed three (3) excused absences from these meetings per school year. If you have a reoccurring conflict with these meeting times, please contact the WFCC Volunteer Coordinator to discuss other options.

I am available to attend meetings at those times.

I am not available to attend meetings at those times, but would like to serve within the agency.

Certification

By signing below, you hereby certify that you have read this application in its entirety and that all statements made in this application are true and complete to the best of your knowledge and the essays submitted are your own work. Any applications with incomplete sections will be returned to the applicant.

Applicant Signature: _____ Date: _____

Parent / Legal Guardian Signature

As the parent / legal guardian of the applicant, I hereby grant my permission to the applicant to participate in the WFCC's Youth Advisory Council which includes, but is not limited to, monthly meetings, volunteering outings, assisting with and/or leading donation drives, educational trainings, booth events, and other activities as they arise. I understand that if accepted, the applicant will need reliable transportation to events and activities. By signing, I give the WFCC permission to run a background check on the applicant.

Parent / Guardian Signature: _____ Date: _____