Membership Application 2017-2018 Youth Philanthropy Initiative

Submit to Community Foundation of Mount Vernon & Knox County by June 5, 2017
In person: Third Floor, 1 South Main St, Mount Vernon (First-Knox Bank Building)
By regular mail: P.O. Box 309, Mount Vernon, Ohio, 43050
Scan and email to Lisa Behr, Program Manager: lbehr@mvkcfoundation.org
If you have questions contact Lisa Behr, Program Manager: 740.326.4297

Name	Email Address	Phone	
Street/Box	City/Village	Zip	
High School (or "Home Schooled")	Gı	Graduating Class of	
Parent(s)/Guardian(s) name(s)			
Person (other than relative) who nominate	ed you for YPI membership		
Please respo	and to the following questions in the space provided (max 250	words)	
Please indicate what extra-curricular activ	ities (school related or otherwise) you have partic	cipated in during the past three years:	
What personal strengths or special skills u	yould you bring to the Youth Philanthropy Initial	Savis	
what personal strengths of special skins w	round you bring to the Touth Timantinopy finda	nive:	
What needs or issues have you observed in	n your community (school or town)?		
Student's Signature	Parent/Guardian Signature		

By signing above I acknowledge that being a member of the Community Foundation Youth Philanthropy Initiative (YPI) requires a time commitment involving attendance at scheduled monthly meetings, typically on Sunday afternoons, from September to May, periodic field trips to non-profit agencies within Knox County, and additional projects to be determined by members of the YPI. I also acknowledge all information provided above is accurate.