



DYC/CCYM YOUTH APPLICATION

NOTE: Your completed application should be sent to your District Coordinator/District Office.

PLEASE INDICATE WHICH YOU ARE INTERESTED IN:

- District Youth Council (DYC)
- Conference Council on Youth Ministries (CCYM)

FIRST NAME:		LAST NAME:	
ADDRESS:		CITY, STATE, ZIP:	
HOME PHONE:		CELL PHONE:	
HOME CHURCH:		DISTRICT:	
EMAIL:			GRADUATION YEAR:

PLEASE SHARE WITH US YOUR LEADERSHIP SKILLS/ABILITIES AND EXPERIENCE:

PLEASE LIST YOUR CURRENT INVOLVEMENT IN EXTRA-CURRICULAR ACTIVITIES AT YOUR CHURCH/SCHOOL/COMMUNITY:

SPECIAL TALENTS (I.E. COMPUTER, PHOTOGRAPHY, ETC.)

WHAT CAMPS/MISSION TRIPS HAVE YOU PARTICIPATED IN?

I realize that the CCYM meetings are held around the East Ohio Conference and some are overnight commitments. I understand that events are held on weekends and attendance is required. (Acknowledgement must be signed by applicant AND parent)

SIGNATURE _____ **DATE** _____

PARENT SIGNATURE _____ **DATE** _____

YOU MUST HAVE 3 LETTERS OF RECOMMENDATION (ONE MUST BE YOUR PASTOR). A separate copy of the following cover letter and recommendation form should be printed for each person completing a recommendation. The completed form should be sent directly to your District Coordinator/District Office by the person completing the recommendation. **Be sure to provide a stamped envelope addressed to your District Coordinator.** If you do not have this information, it can be found on our website at <http://www.eocumc.com/youngpeople/district-coordinators>

DYC/CCYM Recommendation Request

The applicant listed below is applying for a leadership position with the District Youth Council (DYC), or Conference Council on Youth Ministries (CCYM). Kindly assist the DYC or CCYM Leadership Team by providing information requested on the following form. Please mail this form DIRECTLY to the District Coordinator, or District Office listed below. Please do not return this completed form to the applicant.

Dear _____

I am applying for a position on the

- District Youth Council
- Conference Council on Youth Ministries

This is a leadership opportunity for me, and a way for me to serve the greater church. Part of the process includes 3 letters of recommendation.

Will you fill out the questionnaire attached and return it to my district coordinator directly at:

District Coordinator Name: _____

District Coordinator Address: _____

City _____ State _____ Zip _____

District Coordinator Email: _____

Sincerely _____
(Name of Applicant)

(Applicant District)



YOUNG PEOPLE'S MINISTRIES

DYC/CCYM Form Recommendation

Name of Applicant: _____

Position Applied for:

- District Youth Council (DYC)
- Conference Council on Youth Ministries (CCYM)

Years you have known the applicant: _____

Capacity you have known the applicant: _____

Is the Applicant Confirmed? Yes _____ No _____ Confirmation Date _____

Please respond to the following questions based on the knowledge you have of the applicant with the following matrix.

1 – Not at all

2 – Somewhat

3 – Occasionally

4 – For the most part

5 – Always

1. This applicant has a solid beginning foundation in their Christian journey? _____
2. Applicant is very responsible and takes directions well. They can work independently as well as with others to accomplish a goal. _____
3. This applicant is very respectful of others, peers as well as adults. _____
4. This applicant takes initiative to "get the job done", and inspires others along the way. _____
5. This teen is active in their own church, school and community. _____
6. This teen is good at communicating with adults as well as other teens. _____
7. Applicant is a good example of a Christian role model that children and their peers look up to and admire. _____
8. Teen has proven leadership potential. _____

