

2015-2016 Youth Leadership Roundtable

APPLICATION FORM

You **MUST** be aged between **16-25** to apply. If you already have a CV or Resume, you're more than welcome to send that through instead of filling out this application form



PERSONAL DETAILS

Last Name/Surname: _____ Given Name(s): _____

Preferred Name: _____ DOB: _____ (dd/mm/yyyy)

Nationality: _____ Country of Origin: _____

Do you identify as: Aboriginal or Torres Strait Islander Culturally & Linguistically Diverse

Home Address: _____ Suburb: _____

City: _____ State: _____ Postcode: _____

Mobile #: _____ Home #: _____

Email Address: _____

**YOUTH
PARTNERSHIP
PROJECT**

1074 Hay Street, West Perth,
Western Australia 6005
Direct line: +61 8 9267 3908
Mobile: +61 (0) 406 648 865

PARENT/GUARDIAN DETAILS ***Must complete if applicant is under the age of 18***

Name of Parent/Guardian: _____

Home Address [if different from above]: _____

Postal Address [if different from above]: _____

Mobile #: _____ Home #: _____ Work #: _____

Parent/Guardian Signature of Consent: _____ Date: _____

EDUCATION HISTORY: ***Please complete to the best of your ability***

Name of High School: _____ Currently Attending?: Yes No

If no, Year Level Completed: _____

Name of University/Educational Institution: _____

Name of Course: _____ Currently Attending?: Yes No

If no, Level Accomplished: _____

Please list details of other relevant Education that you have had in the space below (e.g. certificates, diplomas):



VOLUNTEERING, COMMUNITY EXPERIENCE & YOUTH ACTIVITIES HISTORY:

Name of Organisation/Service: _____

Role Title: _____

How long were you at this Organisation/Service? _____

Location: _____

Please list your duties and responsibilities in the space below:

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Name of Organisation/Service: _____

Role Title: _____

How long were you at this Organisation/Service? _____

Location: _____

Please list your duties and responsibilities in the space below:

Please list any other activities that you have done to help your community:





WORK HISTORY: ***Please complete if applicable***

Name of Workplace: _____

Position Title: _____

Dates of Employment: _____ Location: _____

Reason for Leaving: _____

Please list your duties and responsibilities in the space below:

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Name of Workplace: _____

Position Title: _____

Dates of Employment: _____ Location: _____

Reason for Leaving: _____

Please list your duties and responsibilities in the space below:

HOBBIES & OTHER INTERESTS:

Please list any hobbies, skills and interests that you have in the space below:

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REFERENCES:

Referee Name: _____

Position Title [if applicable]: _____

Name of Organisation/Institution [if applicable]: _____

Relationship to You: _____

Mobile #: _____ Work #: _____

Email: _____

Referee Name: _____

Position Title [if applicable]: _____

Name of Organisation/Institution [if applicable]: _____

Relationship to You: _____

Mobile #: _____ Work #: _____

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SELECTION CRITERIA

Address the Selection Criteria by answering the following questions:

- *Why do you want to be a part of the Youth Leadership Roundtable?*
- *What or who inspired you to become a leader? And why?*
- *What do you want to change about your community?*

These can be answered in **Written Form (1 page)** or by **Video (2 minutes)**

Please complete this application and send back to anania.tagaro@savethechildren.org.au by the **30 August 2015**. Please ensure that this application form is accompanied by your Cover Letter or Video addressing the 3 Selection Criteria questions. If you would like more information on how to become a Youth Leadership Roundtable Member, contact Anania Tagaro, Senior Project Officer, Save the Children Australia on the above email address or call 08 9267 3908. Good luck!