



# Jackson

**ELECTRIC COOPERATIVE**

N6868 County Rd. F; P.O. Box 546  
Black River Falls, WI 54615-0546  
715-284-5385 or 1-800-370-4607  
FAX: 715-284-7143  
WEB SITE: [www.jackelec.com](http://www.jackelec.com)

## Youth Ambassador Program Application

Qualifications:

- Must be a high school sophomore, junior or senior (status in 2011-2012 school year)
- Have a sincere interest in rural area development, learning about electric cooperatives and enjoying working with others
- Must be able to attend scheduled meetings

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parents or Guardians: \_\_\_\_\_ High School: \_\_\_\_\_

Are Your Parents/Guardians Members of Jackson Electric Cooperative? \_\_\_\_\_

Involvement in School Activities:

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

Participation in Youth or Civic Organizations:

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

How will the Youth Ambassador Program assist in furthering your education?

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

I want to be involved in the Youth Ambassador Program because:

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

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

