

National Marine Sanctuary Advisory Council Youth Seat Application Form

Before applying for **sanctuary** advisory council membership, please review:

- (1) the **sanctuary** advisory council charter provided in your application kit, and;
- (2) the **Office of National Marine Sanctuaries (ONMS)** Sanctuary Advisory Council Implementation Handbook available online at <http://www.sanctuaries.noaa.gov/management/ac/acref.html> (or you may obtain a copy from your local sanctuary – see contact information below).

The charter outlines the purposes and governs the operation of the **sanctuary advisory** council. The handbook provides broader operational requirements for **sanctuary advisory** councils. In applying for **sanctuary advisory** council membership, you are agreeing to abide by the terms of the charter and the handbook if you are selected as a **youth council member or alternate**. Also, please note that youth seats are intended to engage high school students and, therefore, term limits for youth seats may be further limited once a youth reaches his or her 18th birthday or graduates high school.

As a part of the selection process, please note **that** the Office of National Marine Sanctuaries will conduct a LEXIS/NEXIS check and a departmental bureau check for potential conflict of interest and other issues in your background.

Additionally, as per guidance from the White House on May 7, 2009, the Office of National Marine Sanctuaries will conduct a database search (via the Senate’s Lobbying Disclosure Act Database) to determine if you have been a federally registered lobbyist. Individuals, who have been a federally registered lobbyist in the two year period before the proposed appointment date for the advertised council seat(s), may not be selected as an advisory council member or alternate.

Additional information and guidance regarding the use of the information you submit on this form and its availability under federal law can be found at the end of this form. Please review this information. Also, please note that the terms “youth” and “student” are interchangeable in this application form.

Students filling the youth seat must:

- ❖ **Be between the ages of 14 and 17** when they apply;
- ❖ Attend a school, including home schools (**or other alternative high school option**), in the area affected by the sanctuary;
- ❖ Have proven ability to communicate and network with other students within their school, in other schools within his/her community, or with home schooled students **and with adults**;

- ❖ Possess an interest in sanctuary resource protection and management;
- ❖ Have experience and/or knowledge regarding public uses and activities in the sanctuary;
- ❖ Be able to travel to and attend council meetings and retreats (parent/guardian or student provides transportation); **and**
- ❖ Provide written recommendation from one or more teachers.

Once selected, *[insert site]* National Marine Sanctuary staff will contact students **who will be required** to provide:

- ❖ Parent/guardian permission*; and
- ❖ School permission*.

* Note: This will grant blanket permission for all council meetings and retreats.

Procedure for Application:

Step 1: Please provide your contact information and respond to the questions below.

Step 2: Have parent/guardian sign to acknowledge he/she is aware of and in support of your application.

Step 3: The application deadline is *[insert date]*. Please return all pages of **your completed sanctuary advisory council youth seat application form, and any attached statements or documents**, to *[insert local contact information]*.

Date: _____

First Name*: _____ **Middle** _____ **Last** _____

* Please include full first, middle and last names.

Position(s)/Seat(s) applying for: _____ [*insert Youth Seat (non-voting)*]
_____ [*insert Youth Seat Alternate (non-voting)*]

Home Address

Address 1: _____

Address 2: _____

City: _____ **State:** _____ **Zip Code:** _____

Home Phone: _____ **Home Fax:** _____

Student Cell Phone: _____

Student E-mail: _____

Parent/Guardian Cell Phone: _____

Parent/Guardian E-mail: _____

Parent/Guardian Acknowledgement:

I acknowledge that I am aware of and support my son/daughter or ward applying for and potentially serving on the [*insert site*] National Marine Sanctuary Advisory Council.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Date: _____

Please thoroughly address each of the following in an attached statement, by number, in the same order as below:

1. Why are you interested in serving on the sanctuary advisory council?
2. Explain your views regarding the protection and management of marine or Great Lake resources, including natural (fish, coral reefs, etc.), historic and/or cultural resources.
3. Describe what you think is the role of the council, and how you will work to best support the sanctuary as a sanctuary advisory council member or alternate.
4. How much time do you have and are you willing to give to sanctuary advisory council activities (e.g., meetings, constituent outreach, retreats and reviewing written materials)? Please address whether it is possible for you to miss a portion of or all of your classes and club or team activities to attend a sanctuary advisory council meeting or retreat?
5. Explain how you will share information with your peers in the community, take action on council-related issues, etc.
6. Describe what knowledge and experience you can bring to the sanctuary advisory council. Be sure to include qualifications that you have or relevant information that you think would be beneficial to the council.
7. List other groups you belong to or affiliations you have (e.g., student council, science club, soccer team, hiking club, scouts, employment).
8. How long have you lived in the community or area affected by the sanctuary? Please address whether you are a year-round or seasonal resident of the area.

Individuals 18 years of age and older are not eligible to apply for the sanctuary advisory council's youth seat, but may apply for other council seats as they become open and are advertised.

Information obtained through this application process will be used to determine the qualifications of the applicant for membership on the sanctuary advisory council. The Office of National Marine Sanctuaries intends affirmatively to disclose the applications only to DOC/NOAA staff and other members of the applicant review panel. However, the Office of National Marine Sanctuaries may be required to disclose the applications in response to a court order, a congressional request, or a request from the public under the Freedom of Information Act (FOIA).

If disclosure is requested under the FOIA, the Office of National Marine Sanctuaries will endeavor to protect the privacy of applicants by withholding personal information, such as home addresses and telephone numbers. In contrast, statements of philosophy or opinions contained in the application would likely be released. Applying for membership on the sanctuary advisory council is voluntary.

Public reporting burden for this collection of information is estimated to average one hour per response, including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Office of National Marine Sanctuaries, 1305 East West Highway, **N/NMS**, Silver Spring, Maryland 20910.

Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

OMB Control #0648-0397

Expires **TBD**

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