

Pacific Southwest District Youth Cabinet Application

Name _____

Contact #: (_____) - _____ - _____

Email Address: _____

Grade, entering in September, 2017: _____

Home Church of the Brethren Congregation: _____

Please answer each question fully and sincerely on a separate piece of paper attached to this form.

Church Experience 1. Please share how you've been involved with your local congregation. For instance, have you sung in the choir, been active with your youth group, led worship, or been involved in National or District events, etc.?

Faith Experience 2. Describe your faith experience e.g.: milestones, events, persons of influence, etc.

Personal Skills/Qualities 3. Please describe the qualities/skills you possess that will contribute to the Youth Cabinet and explain why you would like to serve as a cabinet member.

References Separately, please have your pastor, a congregational leader, or youth leader (not relatives), write a letter highlighting your character, abilities, and indications of responsibility for serving on the cabinet. This letter (not to exceed one page) should state the reference's name, number and relationship to the applicant and be mailed directly to the District office.

Application and letters of reference must be returned by Monday, August 7, 2017 to: Pacific Southwest District, P.O. Box 219, La Verne, CA, 91750 or Youth@pswdcob.org or fax 909-392-4056.