

STATE CAPITOL  
SACRAMENTO, CA 95814  
TEL (916) 651-4028

MURRIETA DISTRICT OFFICE  
25186 HANCOCK AVE.  
SUITE 320  
MURRIETA, CA 92562  
TEL (951) 894-3530

INDIO DISTRICT OFFICE  
45-125 SMURR STREET  
SUITE B  
INDIO, CA 92201  
TEL (760) 398-6442

# California State Senate

SENATOR  
**MELISSA A. MELENDEZ**  
TWENTY-EIGHTH SENATE DISTRICT



COMMITTEES  
HEALTH  
VICE CHAIR  
HUMAN SERVICES  
TRANSPORTATION  
  
SUBCOMMITTEE  
BUDGET  
SUBCOMMITTEE #3  
ON HEALTH & HUMAN  
SERVICES

## Senator Melissa Melendez Youth Advisory Council Application

|                    |  |                  |  |
|--------------------|--|------------------|--|
| Name               |  |                  |  |
| Address            |  |                  |  |
| Phone              |  | Email            |  |
| Desired start date |  | Desired end date |  |

Please list your availability:

| Day       | Time |
|-----------|------|
| Monday    |      |
| Tuesday   |      |
| Wednesday |      |
| Thursday  |      |
| Friday    |      |

Please respond to the following questions:

1. Why are you interested in joining Senator Melendez's Youth Advisory Council?
2. What are your strengths that would be most applicable to this program?
3. What areas of policy interest you most?
4. What do you hope to get out of the Youth Advisory Council?
5. Will you be taking this internship for college or high school credit? Please explain.

*Thank you for your interest in Senator Melendez's Youth Advisory Council.*

*Please E-mail this application as well as your resume to Angelica Austin at [angelica.austin@sen.ca.gov](mailto:angelica.austin@sen.ca.gov)*