



headspace

Alice Springs

Street 5/5 Hartley St, Alice Springs NT 0870

Mail PO Box 1604, Alice Springs NT 0870

Tel 08 8958 4544 Fax 08 8952 0412

headspace.org.au

YOUTH ADVISORY GROUP

Application Form

Your personal details:

Name _____ Facebook Name: _____

Phone _____ DOB: / /

Email _____

Address _____

When are you available for meetings? M T W T F 9 – 3 3 – 5 AFTER 5

Let's get to know you!

Please tell us a little bit about yourself, such as your hobbies, what you do with your time or what your plans for the future are:

Can you tell us about why you are interested in joining the headspace Alice Springs Youth advisory group?

Have you been / are you involved with any other organisation? If yes, please provide information:



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At headspace Alice Springs we are keen to ensure we hear the voices of young people from a variety of backgrounds and would like it if you could answer the following questions to help us recruit a diverse group of young people for our YAG.

This information is for our records only and will not affect your application process.

Where were you born? _____

What languages do you speak? _____

Do you have any food allergies? _____

What school do you attend? _____ If so, Year? _____

Do you identify as having / had a mental illness? If yes, do you feel comfortable talking about it?

Are you an Aboriginal or Torres Strait Islander?

YES

NO

Nearly done... just a few more questions!

What areas of health and well-being for young people are you most interested in?

Is there anything else you would like to tell us?

Thanks for filling out this application! Any Q's? – (08) 8958 4544

Applicants will be contacted regarding the interview process.

Please Return applications Via email – drop it off – or Post to Neily O’Connell

5/5 Hartley St, Alice Springs NT 0870

post: PO Box 1604, Alice Springs NT 0871

neily.oconnell@caac.org.au