Appendix A: Council Member Description

**Engaging Youth in Substance Abuse Prevention**

**Title of Position: Council Member**

**Purpose of Position:** Youth Leadership Council Members will work alongside other youth in the Boone County area to instill change in the community by advocating and helping to develop policy changes, as well as learning and building awareness of topics including but not limited to: underage drinking, vaping/tobacco use, marijuana and prescription drugs as well as other trends pertain.

**Requirements of Position:** All Active Council Members must:

* Have transportation to all meetings and events
* Be between the ages of 15-17 (returning members may be 18 or of senior age/status in high school)
* Attend a minimum of 70% of all scheduled Advisory Meetings
* Participate in the planning of a Town Hall meeting/large event or Chamber of Commerce Events, National Prevention Week activities, social media postings, vape compliance checks, and other events or activities created by the committee and grantors
* Exhibit leadership qualities, organizational skills, public speaking, timeliness, the ability to delegate and/or be willing to work with community members and leaders
* Display good communication skills with fellow members and facilitators/leaders
* Must agree to be drug and alcohol free while part of the council and acknowledge that their council membership may be terminated immediately for causes including but not limited to: public intoxication, surrounded by others who are underage using illicit or recreational drugs/alcohol/or tobacco and vape products, social media posts or pictures involving parties displaying intoxication or other illicit drug use, or any other school/legal disciplinary action related to drugs/alcohol/or tobacco and vape products

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

**Training Provided:** Members will be provided trainings on various topics that will be addressed during the year including substance use, violence, policy development and skill building for policy advocacy. Trainings will be provided by professionals in the community who are certified or experienced with these topics. Members will also have opportunities for training at the Cebrin Goodman Teen Institute and other types of forums, seminars, sessions, and webinars.

**Location**: Advisory Meetings will be held at (location and times)

**Time Commitment:** All Council Members will be responsible for attending one meeting per month which lasts 90 minutes. In addition to attending meetings, members will be expected to communicate with council members, team leaders, and facilitator monthly or more often as needed. Students will also be fulfilling a requirement of 10 community hours per year. Members may dedicate their time to National Prevention Week, Red Ribbon Week, Drug Take Back Days, and Town Hall Meetings, or other coalition events to help fulfill this requirement.

**Duties:** All members of the Council must be prepared for every meeting with folders and provided binders, writing instruments, and paper for note-taking. Members are also responsible for:

* Communicating electronically with facilitator, team leaders and each other
* Utilizing social media to inform peers and other community members about upcoming events and educational materials
* Completing all tasks assigned by the facilitator or the committee leader on time
* Volunteering to help with community events
* Working with schools/peers/other administrators for National Prevention Week Activities and Town Hall Meetings or other types of events
* Taking on various tasks requested by leaders or facilitators
* Reporting/providing feedback on various topics via email, survey, or other methods

**Reports/feedback required:** Members may be required to submit reports on the status of their involvement in a project to inform their leaders, facilitators or other members. Members may also be asked to give feedback on various topics, trainings, and meetings via email, survey, Doodle or similar.

**Benefits:** Members will gain a greater understanding of working with policy development in their community as well as acquiring important life skills will help them grow as leaders. Members will also gain knowledge of various topics such as substance abuse as it is important to our community’s needs and priorities. Members will generate new friendships and networking abilities while utilizing the skills that they have acquired. Students will be rewarded by:

* Being invited to attend events hosted by community members where Elected Officials may be present
* Receiving media recognition
* Receiving proclamations by the County and/or City
* Earning letters of recommendation from the Executive Committee Members of the BCDPC
* Being invited to attend the Cebrin Goodman Teen Institute at an Illinois State University (and apply for free first-year scholarship to attend) to build leadership skills and network with other youth in Illinois during the (based on performance)
* Being invited to attend conferences to Washington in February and meeting with our Legislators to help advocate for change in our state (These may be paid for with extra grant funds; but some fundraising may be required)

**Supervisor:** Contact the Council Supervisor, Alyssa Lazzerini, with questions or concerns by email at [BCDPC@boonehealth.org](mailto:BCDPC@boonehealth.org). For important matters outside normal business hours, please use Messenger or the closed YLC Facebook page. Cell number may be available upon request.

**Acknowledgement:**  I acknowledge what is expected of me while I am part of this council and will follow all duties and responsibilities as well as tasks assigned to me. I realize that if I do not communicate with my Supervisor or Administrators, fail to attend meetings as assigned without informing my Supervisor, or fail to be alcohol/drug free, I will forfeit my seat on the council. I acknowledge that decisions are based on the discretion of my Supervisor and Administration Staff.

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

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_