

## Young Women's Initiative – Working Group Application Attach a cover letter and resume with this form

Applicant Information  This information may be subject to data requests and practices				
Name (Last, First, Middle Initial):				
Current address:				
			Phone:	
City:	State:		ZIP Code:	
Optional Statistical Information  You are not legally required to provide any of the data requested in this section. However, we are asking all applicants to complete this section to ensure adequate representation.				
Gender:  ☐ Female ☐ Male ☐ Non-conforming	Age:		Disability:  ☐ Yes ☐ No	
Veteran:  ☐ Yes ☐ No	Do you identify  ☐ Yes ☐ No	as part of the	LGBTQ community?	
Are you of Hispanic, Latin, or Spanish Origin:		dian/Native American or Alaska Native ic Islander ern/North African		
Community Specific Working Group Categories  Check all groups you are interested in:				
<ul> <li>□ African American</li> <li>□ African Immigrant</li> <li>□ American Indian and/or Native American</li> <li>□ Asian/ Pacific Islander</li> </ul>		<ul><li>□ Disability</li><li>□ Greater Minnesota</li><li>□ Hispanic and/or Latina</li><li>□ LGBTQ</li></ul>		
Signature				
I swear that, to the best of my knowledge, the above information is correct and that I satisfy all legally prescribed qualifications for the position sought				

Signature:	Date:

## **SUBMITTING APPLICATION - DEADLINE IS NOVEMBER 4, 2016**

All applications and supporting documents must be submitted to the Office of Governor Mark Dayton and Lt. Governor Tina Smith via:

- o Mail or in person: 116 Veterans Service Building 20 West 12<sup>th</sup> Street Saint Paul, MN 55155
- o Email: Appointments.Gov@state.mn.us

If you have any questions regarding the application, please contact University of Minnesota's Robert J. Jones Urban Research and Outreach-Engagement Center at (612) 626-8762, or via email, <a href="urocinfo@umn.edu">urocinfo@umn.edu</a>.