San Diego Museum of Art Teen Council Application
2019-2020 School Year

Application Deadline: **October 11, 2019**

The San Diego Museum of Art’s Teen Council gives High School Students the opportunity to take on a leadership role at the Museum and lend their voices to new and existing programs and offerings. Students work with Museum staff and their peers to share ideas, develop youth events and programming, lend their own expertise to the Museum and participate in unique behind the scenes experiences. Meetings are held quarterly at the Museum.

For questions, email: [teencouncil@sdmart.org](mailto:teencouncil@sdmart.org)

**The Facts**

**What do we do?**

- Teen council members meet three times a school year with Museum educators and Education Department staff to discuss and share ideas on teen programming at the Museum.
- Special opportunities to win prizes when participating in contests.
- Go behind the scenes in exclusive opportunities.
- Create art making projects in the Museum.

**What will you get out of the experience?**

- Opportunity to share your voice and help build program for teens by teens.
- Make friends and meet artists.
- Develop leadership skills and add experience to college applications.
- Become part of the SDMA Museum team.

**How much time do I have to commit?**

- Required: 6 hours a school year (meetings only).
- Optional hours: Teen Art Café events, special programs, Museum visits on one’s own time.

**How do I get started?**

- Send in a completed application.
- If selected, attend the first meeting on November 4, 2019.
- If not selected, sign up to the Teen Art Café email list and attend fun-free teen only events!
Application Form

1. Application deadline: **October 11, 2019**
2. Type or print clearly and retain a copy for your application records.
3. Please submit your application by email to: teencouncil@sdmart.org
4. Applicants moving on to the orientation will be notified by **October 24, 2019**.
5. Only complete applications will be considered.

**Section 1**

Applicant’s Information

Full name: ____________________________________________ Age: ____________

Street address:
____________________________________________________

City: ____________________________ State: ____________

Zip code: ________________

Primary phone number: ________________ Home __ Mobile __

Email address:
____________________________________________________

School attending in 2019/2020: ___________________

Grade level: __________________

Are any of your family or friends SDMA employees, volunteers, or Members? Yes/No

If yes, please tell us more:

How did you hear about the SDMA teen council?

Website __

Social Media __

Friend __

Teacher __

Parent __

Teen Art Café __

Other: __________________________
Please indicate that you have read and agree to each statement below:

__ I commit to being available on the following dates from 4:00–6:00 p.m.

- November 4, 2019
- February 3, 2020
- May 4, 2020

__ I have included one reference letter (from a teacher or mentor).

**Section 2**

Please answer the following questions.

1. Why would you like to be a part of the SDMA teen council? If admitted, how will you contribute to the SDMA teen council?

2. What interests you about art and the SDMA? What have your experiences with museums and other cultural institutions been like?

3. Have you ever attended the teen events or programing at the SDMA? Do you have a favorite exhibition or artwork you have seen at the SDMA?

4. What is your favorite type of art?

5. Have you participated in a teen council before? If yes, please tell us more.
Section 3

Parent/Guardian Information

Parent/Guardian Name: ____________________________

Parent/Guardian Email: __________________________

Primary phone number: ___________________________  Home __  Mobile __

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. If I am chosen to be a part of the SDMA teen council, I will comply with all policies and practices established by the San Diego Museum of Art.

______________________________  _______________________
Signature of applicant                  Date

______________________________  _______________________
Signature of parent/guardian            Date