

# Youth Advisory Council (YAC) 2026-2027 Application

Please complete the application form below.

Thank you!

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Public Disclosure Notice: Information you share with us as part of this application or as a Youth Advisory Council (YAC) member is subject to public disclosure laws and will not be anonymous.

Please read more information below:

If we receive a public disclosure request, we will withhold personal information (name, email address, and phone number) for YAC members and applicants under 18. For YAC members and applicants over 18 years old, we will not withhold personal information. We will document YAC activities (such as recommendations, thoughts, experiences, and concerns) without using names for YAC members of all ages. Sharing personal information on this application or as part of the Youth Advisory Council is optional. For questions or more information, contact the Washington State Department of Health at [adolescenthealthunit@doh.wa.gov](mailto:adolescenthealthunit@doh.wa.gov).

Who can apply to be a member of the DOH Adolescent and Young Adult Health Youth Advisory Council?

We encourage young people from all backgrounds to apply! Interested people must meet the following criteria:

- Live in Washington
- Be 13-22 when you submit the application.
- Applicants under 18:
  - Need parent or guardian permission to take part.
  - May need a trusted adult for emotional or technical support during meetings. Adults do not have to attend meetings.
- Be interested in contributing to and improving public health access and services for young people in Washington.
- Have internet access, and be comfortable using Zoom, email, and tools like GroupMe and Basecamp. Important note: Only eligible and complete applications will be considered. We will notify all applicants whether they were selected by June 30, 2026. Find more information on the Youth Advisory Council website.

Information collected via this survey may be subject to release under RCW 42.56 (Public Records Act).

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email [doh.information@doh.wa.gov](mailto:doh.information@doh.wa.gov).

## Application for Youth Advisory Council

**Please complete the following application to apply to be a member of the Youth Advisory Council. If you have trouble completing any questions or to complete over the phone with DOH staff, please email us at [adolescenthealthunit@doh.wa.gov](mailto:adolescenthealthunit@doh.wa.gov) or call 564-669-1519.**

### Contact Information

We only use this information to contact members about YAC activities, document YAC participation, and share about additional youth engagement activities from DOH, other state agencies, and partners. We will not share your contact information with anyone outside of official YAC and DOH activities without your permission. Please note all contact information is subject to public disclosure laws.

First name

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Preferred name (nickname, chosen name, etc.)

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Last name

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Age

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Email address

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Phone number

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Do you live in Washington?

- Yes  
 No

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Unfortunately, you do not meet eligibility requirements to join the Youth Advisory Council. Thank you for your interest and applying.

Would you like to receive emails about other youth engagement opportunities at the Department of Health or other state agencies like the Health Care Authority or the Office of the Superintendent of Public Instruction?

If yes, sign up for our Next Gen Newsletter using the form below. We share opportunities for the next generation of public health professionals.

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Were you a YAC member in 2025-2026?

- Yes  
 No

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Are you interested in being considered for an internship?

- Yes  
 No

The YAC internship will require about 6-10 hours per week, weekly meetings with DOH staff, and may or may not be a paid position depending on funding. If the position is unpaid, it will be shared by two interns. Only former YAC members will be considered for the internship.

Responsibilities include...

- YAC meeting planning with DOH staff and preparing materials for meetings
- YAC meeting facilitation
- Leading action and content creation on YAC products and deliverables

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Why do you want to be a YAC intern and what qualities would bring to the role?

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Please upload your current resume in pdf format.

**Tell us more about who you are and how you identify - if you want!**

**We want the Youth Advisory Council to reflect the diversity of young people across Washington. We want to include young people with different experiences, identities, backgrounds, communities, abilities, and who come from all parts of the state.**

**Below are a few questions to help us learn more about your unique identity and background. All questions are optional - you can share as much or as little as you are comfortable with.**

Washington county you live in

- Adams County
- Asotin County
- Benton County
- Chelan County
- Clallam County
- Clark County
- Columbia County
- Cowlitz County
- Douglas County
- Ferry County
- Franklin County
- Garfield County
- Grant County
- Grays Harbor County
- Island County
- Jefferson County
- King County
- Kitsap County
- Kittitas County
- Klickitat County
- Lewis County
- Lincoln County
- Mason County
- Okanogan County
- Pacific County
- Pend Oreille County
- Pierce County
- San Juan County
- Skagit County
- Skamania County
- Snohomish County
- Spokane County
- Stevens County
- Thurston County
- Wahkiakum County
- Walla Walla County
- Whatcom County
- Whitman County
- Yakima County

Was your perspective on health care and public health shaped by living in another Washington county? If so, please list the county or counties.

- Adams County
- Asotin County
- Benton County
- Chelan County
- Clallam County
- Clark County
- Columbia County
- Cowlitz County
- Douglas County
- Ferry County
- Franklin County
- Garfield County
- Grant County
- Grays Harbor County
- Island County
- Jefferson County
- King County
- Kitsap County
- Kittitas County
- Klickitat County
- Lewis County
- Lincoln County
- Mason County
- Okanogan County
- Pacific County
- Pend Oreille County
- Pierce County
- San Juan County
- Skagit County
- Skamania County
- Snohomish County
- Spokane County
- Stevens County
- Thurston County
- Wahkiakum County
- Walla Walla County
- Whatcom County
- Whitman County
- Yakima County

If you are in school, please specify whether you are in high school, college, trade school, or another type of program.

- Middle school or Jr. High
- High school
- College or University
- Trade school
- Another type of program (please specify)
- Not currently in school

Program type:

\_\_\_\_\_

Grade or year in school (if applicable)

\_\_\_\_\_

Race/Ethnicity

\_\_\_\_\_

Gender Identity

\_\_\_\_\_

Examples: Girl/Woman, Boy/Man, Trans, Cis, Genderqueer, Nonbinary, Two-Spirit, Genderfluid

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Sexual Orientation

Examples: Heterosexual (straight), Gay, Lesbian,  
Bisexual, Pansexual, Queer, Asexual, Questioning/not  
sure

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Pronouns

Examples: she/her, they/them, he/him, ze/zir

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**When and how can you participate in YAC meetings?**

**We want to know more about how often you can participate in meetings. Tell us more about the support you may need to attend meetings.**

Are you able to attend meetings using Zoom?  Yes  No

Are you able to communicate with YAC facilitators and other members using email or GroupMe?  Yes  No

Meeting commitment  Yes  No

We expect to meet once a month from August 2026 through June 2027. Meetings are typically on the second Thursday of each month, from 4:30-6pm. Meetings may change based on member availability.

Please note: There is a required, day-long kickoff meeting on Friday, August 7 in the Olympia area. You may attend this kickoff meeting in person or by Zoom.

If selected, will you be able to attend most meetings (80% or more)?

How can we best support your virtual participation? (Check all that apply)

- Interpretation/translation in an additional language
- Accessibility accommodations for a disability, like ASL
- Technology assistance or accessibility
- Other

Interpretation or translation in the following language: \_\_\_\_\_

Type of accessibility accommodations for a disability: \_\_\_\_\_

Type of technology assistance needed: \_\_\_\_\_

Tell us how we can best support your participation: \_\_\_\_\_

If you are accepted, would you like to receive materials for your parent, guardian, or trusted adult, including consent paperwork, in a language other than English? \_\_\_\_\_

If yes, please tell us which language.

**Why are you interested in joining the Youth Advisory Council?**

**We'd love to learn more about why you want to be part of the Youth Advisory Council and how you'd like to be involved. Your answers to the questions below will help us select new members.**

**Note for returning members only: If you were a YAC member last year, you may enter "N/A" or "not applicable" for each of the essay questions.**

What interests you about joining the YAC at DOH? What is your biggest motivation to apply?

\_\_\_\_\_

What skills or experiences will help you contribute to the YAC discussions and activities at DOH?

\_\_\_\_\_

What are one or two health-related issues or gaps in your community that you think should be addressed, and why do they matter to you?

\_\_\_\_\_

Permission to use anonymous quotes in Youth Advisory Council (YAC) report

- DOH may use my anonymous quotes.  
 DOH may NOT use any quotes from my application.

Please tell us if you are comfortable with us using anonymous quotes from your essay questions in a report.

#### How we use your application

We use your responses in 2 ways:

To decide who will serve on the Youth Advisory Council.

To understand what health issues matter most to young people in Washington.

Even if you're not selected, your responses are still important. They help us make sure our programs and services meet the needs of teens and young adults in Washington.

We may create a report that summarizes the themes we find across applications and share it within the Department of Health or with other partner organizations.

The report may include direct quotes that illustrate youth priorities described in essay questions. Any quotes included in our report will be anonymous without any identifiable information. We will share the report or any materials we create with young people through our Next Gen Newsletter.