



## Junior Council Person (JCP) Program Recognition Form

Borough Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Complete Address: \_\_\_\_\_

County: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Name(s) of current Junior Council Person(s):

\_\_\_\_\_  
\_\_\_\_\_

I certify that the Junior Council Person(s) named above has faithfully served the Borough of \_\_\_\_\_ for at least six months, having attended a majority of council meetings in that time frame and participated at an admirable level alongside elected borough officials in discussing and solving issues facing the Borough.

The Borough requests our Junior Council Person(s) be recognized during the borough council meeting on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ at \_\_\_\_\_ PM.  
Date Time

Location of meeting: \_\_\_\_\_

\_\_\_\_\_  
Council President's Name Date

Please forward photos taken at the meeting (with individuals labeled) to be posted on the PSAB website.

Return completed form to: PA State Association of Boroughs  
Attn: Stephanie Drake  
JCP Outreach Project Coordinator  
2941 North Front Street, Harrisburg, PA 17110  
Email: [sdrake@boroughs.org](mailto:sdrake@boroughs.org)  
Phone: 800-232-7722, ext. 1017  
Fax: 717-236-8289