
General Information

1. Of the activities that you listed, which one gives you the most satisfaction? Why? _____

2. What do you consider to be your greatest strength? _____

3. What do you consider to be a weakness that you would like to change into a strength? _____

4. Why are you applying to the Youth Leadership program? _____

5. What do you think your involvement will be in shaping the future of our community? _____

Essay

On an attached piece of paper, please respond to the following question in 200 words or less.

Who do you admire as a leader and why?

References

Please give one reference form to your high school principal, counselor or a teacher. Give the other reference forms to any adult who knows you well, other than a parent or relative, for example, scout leader, employer, coach, community leader, etc. At least one reference must be from outside the school.

1. Name of Principal, Counselor or Teacher _____
2. Name of Reference _____
3. Name of Reference _____



Youth Leadership Reference Form

**** Please return this form to the
guidance counselor by: _____**

Please type or print in ink

This section to be completed by applicant

Name: Last _____ First _____ Middle Initial _____

Address _____

City _____ State _____ Zip Code _____

E-mail address _____

Three references for each applicant must be returned to the *Youth Leadership* Selection Committee. The comments will be used for *Youth Leadership* selection purposes only.

To the Reference

The person named above is an applicant for *Youth Leadership*. *Youth Leadership* is an educational program designed to nurture and enhance the skills of students from our community who wish to impact the future. *Youth Leadership* offers rare opportunities to interact with community leaders and explore issues, concerns and activities of our community.

The goals of *Youth Leadership* are to:

- present in-depth programs that acquaint participants with community needs, problems and resources and allow interaction with community leaders and decision makers.
- provide opportunities for students from different areas to know one another and develop a level of mutual trust and respect.
- foster students interest in community and voluntary activities.
- identify and develop leadership skills.

Your assistance is gratefully acknowledged.

Please complete the following questionnaire on the back of this page and return to the guidance counselor.

Name of reference _____

Position/Title _____

School/Firm/Organization _____

City _____ State _____ Zip Code _____

(Over)

1. How long, and in what capacity, have you known the applicant?

2. How does the applicant exhibit the following?

Concern for others

Responsibility

Maturity

Interaction with peers

3. What other leadership qualities do you see in the applicant in addition to those listed above?

4. How will the participation in this program benefit the applicant?

5. Additional comments

Signature of Reference _____ Date _____



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Signature of Reference _____ Date _____



Attendance Agreement Form

Please return this form to your guidance counselor by: _____

Please type or print in ink

Your commitment to this exciting Youth Leadership Program involves mandatory participation on the following dates:

May – Orientation

July 19, 20 & 21 – Overnight Retreat at White Sulphur Springs

September – Heritage/ History Session

October – Economic Development

November – Education Session

December – Social Norms

January, 2011 – Judicial Session

February – Health/Human Service

March – Leadership Refocus/Project Planning

April – Conflict Management & Negotiations

May – Graduation (**to be determined**)

Your guidance counselor will have the available session dates by March 2010

** Date of Class Service Project will be decided by the class.*

*** Parents will need to provide transportation to and from White Sulphur Springs unless other arrangements are made.*

**** Parents may be asked to provide transportation for special circumstances at any given time.*

We understand and agree to the attendance requirements listed above.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____