



# YOUTH LEADERSHIP 2010-2011 APPLICATION FORM

## PERSONAL INFORMATION

NAME: \_\_\_\_\_ PREFERRED NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ GENDER: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ CURRENT GRADE: \_\_\_\_\_

NAME OF PARENT(S) OR GUARDIAN: \_\_\_\_\_

NAME OF PARENT GRADUATE OF LEADERSHIP: \_\_\_\_\_

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## CRITERIA FOR SELECTION

- \* High school student
- \* Program commitment
- \* Participated in an organized effort
- \* Resident or Student in Ashtabula County
- \* Leadership abilities may include non-traditional initiatives
- \* Self-reliant
- \* Full support from school
- \* Academically sound
- \* Parental permission

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**YOUTH LEADERSHIP ASHTABULA COUNTY IS SPONSORED BY LEADERSHIP ASHTABULA COUNTY, INC.**

We are a network of individuals – working individually and collectively-  
strengthening community.

## SCHOOL EXPERIENCE

List any awards, honors or academic recognition for school, or community-related activities you have received over the last four years.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Give an example of how you have demonstrated individual initiative.

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What do you hope to gain from your participation in the YOUTH LEADERSHIP program?

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## ORGANIZATIONS AND ACTIVITIES

List in order of importance to you, up to five, activities or organizations in which you have participated during the past four years. (Examples: school, volunteer, social, athletic, etc.)

	<b>Organization/Activity</b>	<b>Grade</b>	<b>Leadership Responsibility/Involvement</b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

Select an activity/organization listed above and briefly explain how your participation has been of benefit to you.

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## REFERENCES (2)

Return the two reference forms completed by adults, one completed by a teacher, the other by an adult who knows you well (other than a parent or relative).

## FUNDING

\$400.00 is the tuition for YOUTH LEADERSHIP Ashtabula County. \$200 is due upon acceptance to the YL Program and the remaining \$200 is due prior to the Opening Retreat. (A payment plan may be arranged provided it is in writing to the LEADERSHIP Office.) For scholarship information, please contact the LEADERSHIP office. This program is funded in part by individual, corporate and foundation contributions.

## ATTENDANCE

Students are required to attend the Opening Retreat, plus sessions during the school year. (This will involve missing some school days.) See enclosed fact sheet for dates of the Program Days. More than one absence will result in dismissal from the program. The Executive Director reserves the right to make exceptions.

### **Applicant Commitment**

I understand the purpose of YOUTH LEADERSHIP Ashtabula County. If I am selected, I will devote my time and resources to completing the program. In signing this application, I understand these commitments and agree to honor them. I understand attendance is required at the Opening Retreat and monthly meetings.

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Signature of Applicant

Date

### **Principal Nomination**

I support this student's application to YOUTH LEADERSHIP Ashtabula County. I understand attendance is required at the Opening Retreat and all program days.

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Signature of Principal

Date

### **Parental Support**

I grant permission for YOUTH LEADERSHIP Ashtabula County to transport my child between sites on monthly scheduled dates between September and May. I understand the attendance policy and am aware more than one absence will result in the dismissal of my child from the program.

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Signature of Parent(s) or Guardian

Date

**Please send applications to: LEADERSHIP Ashtabula County  
PO Box 643 3441 North Ridge West  
Ashtabula, OH 44005-0643  
440-998-3888 / Fax: 440-992-2474**

**Applications are due by: May 1, 2010**

## **"BEING A LEADER"**

As part of the application process, we are asking each YOUth LEADERship applicant to submit a 500 word essay (typed or handwritten) on "BEING A LEADER". The essay should be included along with the application and is also due by May 1, 2010.

# YOUth LEADERship REFERENCE FORM (1 of 2)

YL APPLICANT'S NAME: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

## TO THE REFERENCE:

The person named above is an applicant for the YOUth LEADERship Ashtabula County Program. The Selection Committee attaches considerable weight to the statements made by the references of the applicant. The committee is aware of the time necessary to prepare such an assessment and gratefully acknowledges your help.

NAME OF REFERENCE: \_\_\_\_\_

POSITION/TITLE: \_\_\_\_\_

SCHOOL/FIRM/ORGANIZATION: \_\_\_\_\_

1. For how long and in what capacity have you known the applicant?

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

2. What do you consider the applicant's primary talents/strengths?

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

3. Please comment on the applicant's relationship with his or her peers?

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

4. Please rate the applicant with other high school students you have known.

*1-Outstanding      2-Excellent      3-Good      4-Average      5-Unable to judge*

Character \_\_\_\_\_

Ability to work with others \_\_\_\_\_

Concern for others \_\_\_\_\_

Maturity \_\_\_\_\_

Responsibility \_\_\_\_\_

Oral communication skills \_\_\_\_\_

Leadership \_\_\_\_\_

Interest in community affairs \_\_\_\_\_

Initiative \_\_\_\_\_

Signature of reference: \_\_\_\_\_

Date: \_\_\_\_\_

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# YOUth LEADERship REFERENCE FORM (2 of 2)

YL APPLICANT'S NAME: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

## TO THE REFERENCE:

The person named above is an applicant for the YOUth LEADERship Ashtabula County Program. The Selection Committee attaches considerable weight to the statements made by the references of the applicant. The committee is aware of the time necessary to prepare such an assessment and gratefully acknowledges your help.

NAME OF REFERENCE: \_\_\_\_\_

POSITION/TITLE: \_\_\_\_\_

SCHOOL/FIRM/ORGANIZATION: \_\_\_\_\_

1. For how long and in what capacity have you known the applicant?

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

2. What do you consider the applicant's primary talents/strengths?

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

4. Please comment on the applicant's relationship with his or her peers?

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

4. Please rate the applicant with other high school students you have known.

*1-Outstanding      2-Excellent      3-Good      4-Average      5-Unable to judge*

Character \_\_\_\_\_

Ability to work with others \_\_\_\_\_

Concern for others \_\_\_\_\_

Maturity \_\_\_\_\_

Responsibility \_\_\_\_\_

Oral communication skills \_\_\_\_\_

Leadership \_\_\_\_\_

Interest in community affairs \_\_\_\_\_

Initiative \_\_\_\_\_

Signature of reference: \_\_\_\_\_

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# YOUth LEADERship Ashtabula County 2010-2011 Calendar

Wednesday, September 8, 2010	Evening Orientation
Thursday, September 9, 2010	Opening Retreat
Wednesday, October 6, 2010	YL Day
Wednesday, November 10, 2010	YL Day
Wednesday, December 8, 2010	YL Day
December 13-17, 2010	Community Service Projects
Wednesday, January 12, 2011	YL Day
Wednesday, February 9, 2011	YL Day
Wednesday, March 9, 2011	YL Day
Wednesday, April 6, 2011	YL Day
Wednesday, May 11, 2011	Closing Day/Graduation

Most program days will run 7:30 AM . 2:30 PM