

UAY Community Youth Leadership Program 2011-2012 APPLICATION



community youth
leadership program

Deadlines:

Application due by Friday, May 6th, 2011 at 5pm,
or must be postmarked by May 1st.

Send or deliver to:

United Action for Youth
Erin Shaw, CYLP
410 Iowa Avenue
Iowa City, IA 52240.

This application becomes complete and valid when the following five materials have been received:

1. Application
2. Two written essays
3. Reference Form 1 - Principal, Counselor or Teacher
4. Reference Form 2- Personal
5. Attendance & Participation Policy, signed by applicant and parent.

Instructions:

Please neatly print or type each section. Application must be signed by both applicant and parent. If you have any questions, please call or Erin Shaw at UAY: (319) 338-7518, erin.shaw@unitedactionforyouth.org

CONTACT INFORMATION

Last Name _____ First _____ Middle _ _____

Name you prefer to be called: _____

Birthday ___/___/____ School: _____

Home Phone: _____ Applicant Cell Phone: _____

Applicant Email: _____

Home Address: _____ City _____ Zip _____

Parent or Guardian's Name: _____

Parent/Guardian Address (if different): _____

Parent/Guardian Home Phone (if different): _____

Parent Email: _____ Cell Phone: _____

EMERGENCY CONTACTS

1. Name: _____ Relationship: _____
Phone: Home: _____ & Cell: _____

2. Name: _____ Relationship: _____
Phone: Home: _____ & Cell: _____

3. Name: _____ Relationship: _____
Phone: Home: _____ & Cell: _____

SCHOOL EXPERIENCE, HONORS, & AWARDS

High School: _____
Other schools attended: _____

List up to three special awards, honors or acknowledgements for academic, school or community related activities you have received in the past four years:

1. _____

2. _____

3. _____

WORK EXPERIENCE

List any job experience, paid or volunteer, and briefly describe the responsibilities involved.

1. _____

2. _____

3. _____

Do you currently have a part-time job? _____ How many hours per week? _____
Would your job interfere with your participation in the Leadership Program? _____

ORGANIZATIONS AND ACTIVITIES

Please list up to five activities or organizations in which you have participated in during the last four years.

| Activity/Organization | # of Years Involved | Awards, Honors | Offices Held |
|-----------------------|---------------------|----------------|--------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

CYLP & YOU (Short-Answer)

1. Using 3-5 phrases or adjectives, please describe yourself.

2. What three things concern you most about life in Johnson County?

3. What do you think are three of the biggest strengths of our community?

4. What do you hope to get out of the CYLP program? Please reflect on your strengths and areas for growth as a youth leader and member of our community.

ESSAYS

Please respond to the following two questions in 150 words or less on a separate sheet of paper.

1. If you could improve anything in your community, what would it be, why would you choose it, and how would you improve it?

2. What is your definition of leadership?

ATTENDANCE & PARTICIPATION POLICY

Each participant is expected to attend every CYLP session. To make sure you do not have unavoidable conflicts, please compare your schedule with the program dates before completing your application. If selected, you **must** commit to attend all program sessions including the retreat, which is a two-day, overnight session. CYLP participants are also also required to communicate in group discussions between session dates via Facebook or email.

APPLICANT'S COMMITMENT

I have read the attendance and participation policy and agree that it is essential I attend all the Leadership Program sessions. **I understand that if I do not meet the attendance requirements I may be dropped from the program.**

Signature of Applicant

Date

PARENT/GUARDIAN COMMITMENT

_____ has my full support for the time and personal commitment required to participate in the Community Youth Leadership Program. I understand that attendance at all sessions is mandatory for the successful completion and full experience of the program.

Signature of Parent/Guardian

Date

INFORMATION FOR THE APPLICANT

Review the following information before completing your application form. 100% attendance at all program sessions is expected, so review the program dates carefully to make sure you do not have any conflicts.

COST:

It is FREE to apply. Accepted applicants will be asked for \$50 (\$25 each semester) to help cover food, transportation and supplies. Scholarships are available.

ELIGIBILITY:

High School sophomores who attend public and private schools, or are home-schooled in the Johnson County area may apply to participate in their Junior year.

INTERVIEWS and the the SELECTION PROCESS

*After receiving your complete application, applicants will be receiving a call to schedule a 15-minute interview, which will take place on between the dates of May 16-27.

*Applications will be reviewed in confidence.

*After interviews, applicants will be informed of acceptance in a written letter by June 6th.

*The Selection Committee will be selecting applicants based on 1) demonstration of a sincere desire to learn about and become more involved in the community; 2) demonstration of a sincere desire to improve and develop lifelong leadership skills; 3) demonstration of the ability to work well in a team or group.

*20-24 students will be selected for the program

PROGRAM OVERVIEW:

The Program will consist of an opening overnight retreat in August, full day sessions each month from September through March, and a final service-learning project. The program will close with a graduation ceremony in April 2012. The monthly sessions include panels, tours, and activities to explore leadership and important topics in our community. Session activities and discussions follow a curriculum based on the nationally recognized *Points of Light Leadership Program*, focusing on aspects of creative leadership. A committee of six adult leaders from a variety of fields in the local community help to plan each session day, along with the UAY CYLP coordinator.

ATTENDANCE:

Program participants must agree to attend ALL program days. Extenuating circumstances will be dealt with on an individual basis, and require parent/guardian consent. Exceptions will be made for individuals with religious obligations on session days,

Program Dates:

ORIENTATION & RETREAT: August 20-21, 2011 (11am 8/20- 3pm 8/21)

ARTS & CULTURE: September 16, 2011 (8am-3pm)

ENVIRONMENT & AGRICULTURE: October 14, 2011 (8am-3pm)

ECONOMICS DAY: November 11, 2011 (8am-3pm)

HEALTH CARE DAY: December 9, 2011 (8am-3pm)

MLK SERVICE LEARNING DAY: January 16, 2012 (8am-3pm)

LIVING LEADERSHIP: February 20, 2012 (8am-3pm)

THE FINALE: March 27, 2012 (8am-3pm)

GRADUATION: April 11, 2012 (6:40-8pm)

CONTACT:

If you have any questions about the program or application, please contact Erin Shaw at (319) 338-7518, erin.shaw@unitedactionforyouth.org. Alumni student and parent references available upon request.

REFERENCE FORM 1: School

To be filled out by your Principal, Counselor or Teacher

TO THE APPLICANT

Last Name _____ First _____

The Community Youth Leadership Program must receive this form by May 6, 2011. The comments will be used for Community Youth Leadership Program selection purposes only. Please sign and date the waiver below.

Waiver of Access: I as applicant, waive the right of personal access to the reference.

Signature of Applicant

TO THE REFERENCE

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

Please return this form by May 6, 2011 to:

United Action for Youth

CYLP, Erin Shaw

410 Iowa Avenue

Iowa City, IA 52240

Name of Reference: _____

Position/Title: _____

School/Firm/Organization _____

E-mail: _____

Phone: _____

Please answer the following questions on a separate sheet of paper:

1. How long and in what capacity have you known the applicant?
2. What do you consider the applicant's primary talents and strengths?
3. What do you consider the applicant's chief weakness?
4. Can you comment on the applicant's communication and behavior with his or her peers?
5. Please comment generally on the applicant's interest in community affairs and potential for leadership.

Applicant's grade point average is _____ on a _____ point scale.

REFERENCE FORM 1, pg. 2

Please use the scale below to compare the applicant with other high school sophomores you have known.

| | Exceptional | Outstanding | Excellent | Good | Average | Poor | Unable to Judge |
|---|-------------|-------------|-----------|------|---------|------|-----------------|
| Character | | | | | | | |
| Concern for Others | | | | | | | |
| Responsibility | | | | | | | |
| Leadership | | | | | | | |
| Initiative | | | | | | | |
| Curiosity | | | | | | | |
| Ability to Work with Others | | | | | | | |
| Maturity | | | | | | | |
| Poise | | | | | | | |
| Oral Communication Skills | | | | | | | |
| Persistence and Drive | | | | | | | |
| Interest in Community Affairs | | | | | | | |
| Analytical Ability (ability to explore problems in an orderly manner and generate alternatives) | | | | | | | |

Additional Comment:

SIGNATURE OF REFERENCE

DATE

NOTE: THIS SIGNATURE VERIFIES YOUR APPROVAL FOR THE APPLICANT TO ATTEND ALL SESSIONS OF THE YOUTH LEADERSHIP PROGRAM

REFERENCE FORM 2 – Personal

To be filled out by an adult who knows you well, other than a parent or relative.

TO THE APPLICANT

Last Name _____ First _____

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 4. Can you comment on the applicant's communication and behavior with his or her peers?
 5. Please comment generally on the applicant's interest in community affairs and potential for leadership.
-

REFERENCE FORM 2, pg. 2

Please use the scale below to compare the applicant with other high school sophomores you have known.

| | Exceptional | Outstanding | Excellent | Good | Average | Poor | Unable to Judge |
|---|-------------|-------------|-----------|------|---------|------|-----------------|
| Character | | | | | | | |
| Concern for Others | | | | | | | |
| Responsibility | | | | | | | |
| Leadership | | | | | | | |
| Initiative | | | | | | | |
| Curiosity | | | | | | | |
| Ability to Work with Others | | | | | | | |
| Maturity | | | | | | | |
| Poise | | | | | | | |
| Oral Communication Skills | | | | | | | |
| Persistence and Drive | | | | | | | |
| Interest in Community Affairs | | | | | | | |
| Analytical Ability (ability to explore problems in an orderly manner and generate alternatives) | | | | | | | |

Additional Comment:

SIGNATURE OF REFERENCE

DATE

NOTE: THIS SIGNATURE VERIFIES YOUR APPROVAL FOR THE APPLICANT TO ATTEND ALL SESSIONS OF THE YOUTH LEADERSHIP PROGRAM _____