

YOUTH LEADERSHIP AMES

2018-2019 Application

A joint program facilitated and funded by:



Ames
CHAMBER OF COMMERCE



Ames Chamber of Commerce & Young Professionals of Ames

304 Main Street

Ames IA 50010

515.232.2310

www.ameschamber.com

Youth Leadership Ames (YLA)

A Program of the Ames Chamber of Commerce designed for High School JUNIORS
Sponsored in part by the Young Professionals of Ames (YPA)

Please submit application to:

Youth Leadership Ames
Ames Chamber of Commerce
304 Main Street
Ames, IA 50010
OR FAX to 515-233-3203

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

1. Application
2. Parent and Principal Permission Form completed

Please type or print application (no pencil, please). Complete all information using this form only. Do not use additional pages.

Postmark deadline for all materials is **June 1, 2018**. If you have any questions, please call Sarah Buss at the Ames Chamber of Commerce at 232-2310, or e-mail at sarah@ameschamber.com

PERSONAL INFORMATION

Last Name _____ First Name _____ Middle _____

Name you prefer to be called: _____

Birthday ____/____/____

Home Phone: (____) _____

Email: _____

Home Address: _____

Parent or Guardian's Name: _____

Parent or Guardian's Address (if different) _____

Parent or Guardian's Home Phone (if different) _____

Parent or Guardian's Email: _____ Work Phone: _____

EMERGENCY CONTACTS

1. Name: _____ Relationship _____
Phone: _____

2. Name: _____ Relationship _____
Phone: _____

3. Name: _____ Relationship _____
Phone: _____

SCHOOL EXPERIENCE

High School: _____

Other schools attended: _____ At the start of the

2018-2019 School Year I will be a:

FRESHMAN SOPHOMORE JUNIOR SENIOR (circle one)

List no more than five (5) school related activities in order of importance in which you have participated during the last two years:

NAME OF SCHOOL CLUB/ORGANIZATION	WHEN INVOLVED	WHAT WAS YOUR ROLE?
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What school activities would you like to be in?

List no more than five (5) non-school related or non-employment related activities in order of importance in which you have participated during the last two years. (ex: community/civic/religious/scouting/volunteer/athletic, etc.)

NAME OF CLUB/ORGANIZATION	WHEN INVOLVED	WHAT WAS YOUR ROLE?
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List any special recognition or honors for academic, school, religious, or community related activities you have received over the last two years.

WORK EXPERIENCE

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

ABOUT YOU

We are looking for leaders that represent each of these categories. Select the one category that best describes you and explain why.

___already an established leader

___becoming a leader (have showed some experience leading)

___could be a leader (shows interest but needs skill and opportunity)

If you could change anything about your school, what would it be and why?

What three things concern you most about life in Story County?

What do you hope to get out of the Youth Leadership Ames program?

How do you define leadership?

DUE: June 1, 2018, to Youth Leadership Ames, Ames Chamber of Commerce, 304 Main Street, Ames, IA 50010

For more information regarding the Youth Leadership Ames (YLA) program, please call the Ames Chamber of Commerce office at (515) 232-2310
OR FAX to 515-233-3203.

APPLICANT SIGNATURE PAGE

If selected, you must be in good standing in the community and commit to attending all the Youth Leadership Ames (YLA) sessions and graduation. Full attendance by each participant is mandatory if YLA is to meet its objectives. If more than 2 sessions are missed for any reason, community service will be required for graduation. Youth Leadership Ames will work with the Ames, Ballard and Gilbert Community Schools to encourage school attendance credit.

I understand and accept the attendance requirements for Youth Leadership Ames (YLA).

Student signature

Date

Please list two (2) adults who know you well, excluding parent/guardian (ex: teacher, employer, faith leader, etc.) as references.

Your name _____

1. _____

Name of reference

Position/Title

School/Business/Organization

Address

Phone

2. _____

Name of reference

Position/Title

School/Business/Organization

Address

Phone

Youth Leadership Ames (YLA)

PARENT AND PRINCIPAL PERMISSION FORM

PARENT APPROVAL

Applicant will not be considered unless this and all other forms are submitted by the deadline.

I am the parent/legal guardian of _____ (student name).
I have read the information on the Youth Leadership Ames (YLA), a program of the Ames Chamber of Commerce, and am willing to have my child participate. **I understand that attendance at all sessions, including graduation, is mandatory.** Youth Leadership Ames (YLA), a program of the Ames Chamber of Commerce, its agents and its employees have my full permission and consent to transport and otherwise provide transportation for my child by public service bus, private automobile, van or other appropriate means of transportation in connection with all sessions of Youth Leadership Ames (YLA) during the school year in which he/she is a participant.

I hereby release and hold harmless Youth Leadership Ames (YLA), a program of the Ames Chamber of Commerce, its members, agents, or any individuals in the planning, organization or presentation of Youth Leadership Ames (YLA) programming, for any accident, injury, illness or any damage whatsoever related to the above mentioned student's attendance at or participation in any activity or session of Youth Leadership Ames (YLA). I release my child's photographs for promotion and marketing for current and future YLA materials.

Parent(s)/legal guardian name (please print)

Signature of parent(s)/legal guardian

Date

Home phone

Work phone

Address

City

Zip

SCHOOL APPROVAL

All applicants **MUST** have the approval of their school principal to attend the eight (8) mandatory sessions + graduation of the Youth Leadership Ames (YLA). Please have your principal sign below:

I approve of the participation of _____ (student name) in the Youth Leadership Ames (YLA) program for 2018-2019. The student meets the criteria of being academically sound and in good standing.

Principal name (please print)

School

Phone

Email

Signature of Principal

Date

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