



APPLICATION FORM
(ALL APPLICATIONS WILL BE REVIEWED IN CONFIDENCE)

DEADLINE TO APPLY IS SEPTEMBER 11, 2009

YLH SCHEDULE FOR 2009-10

Tuesday, October 27, 2009	Reception and Orientation (6:30 p.m.)
Tuesday, November 3, 2009	Team Building & YMCA Action Learning
Saturday, December 5, 2009	Public Safety / Board of Education Day
Saturday, January 16, 2010	Hospital Day
Tuesday, February 10, 2010	State Capitol Day
Saturday, March 20, 2010	County Tour
Saturday, April 17, 2010	Hands On Henry
Monday, May 3, 2010	Graduation-Atlanta Motor Speedway (6:30 p.m.)

Monthly programs will begin at 9:00 a.m. and end around 3:00 p.m. unless you are notified otherwise. Lunch will be provided. **Please carefully review the above schedule because ATTENDANCE IS MANDATORY.** Any student who misses more than one monthly program will not receive a certificate of completion.

ESTABLISHED THROUGH THE EFFORTS OF:

Leadership Henry Board
Henry County Extension Service
Henry County School System

Henry County Chamber of Commerce
William R. & Sara B. Smith Foundation
Kiwanis Club of Henry County

For any questions or concerns, please call 770-957-5786 or leadership@henrycounty.com

PLEASE PRINT (USE INK) OR TYPE:

PERSONAL INFORMATION

Name (Last)_____ (First)_____ (Middle)_____

Name you prefer to be called_____ Home Phone_____

Age_____ Sex _____ School _____

Home Address _____

City _____ Zip Code _____ Email_____

Parents/Guardians' Names _____

Your Shirt Size T-shirt/Sweat Shirt_____

SCHOOL EXPERIENCE

Other Schools attended_____

List up to five awards, honors or recognitions that you have received from the 7th grade through the present for academic, school, or community-related activities. _____

ORGANIZATIONS AND ACTIVITIES

Please list, in order of importance to you, up to five school, volunteer, religious, social, athletic, or other organizations or activities in which you have participated during the last four years.

	ORGANIZATION / ACTIVITY	GRADE IN SCHOOL	YOUR INVOLVEMENT
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

WORK EXPERIENCE

List any part-time job experience you have had, paid or volunteer, and briefly tell what it involved.

Do you currently have a job: _____ How many hours per week? _____

Would your job interfere with your participation in Youth Leadership Henry? _____

GENERAL INFORMATION

1. What goals (personal, educational and/or career goals) have you set for your future, and how do you plan to attain those goals?

2. Tell us about a leadership role that you have had in your school, community, church, work or family life, and tell some of the responsibilities you had in that role.

3. As a leader in the community, what changes would you make and why?

4. What benefits do you hope to receive by participating in Youth Leadership Henry?

REFERENCES

Please list the names of the two people who would be a reference for you: 1) your high school principal, counselor, or teacher and 2) any adult who knows you well, other than a parent or relative (for example, a teacher, scout leader, church youth leader, etc.).

1. Name of Principal / Counselor / Teacher _____
Position / Title _____
Telephone Number _____
2. Name of Other Adult Reference _____
Position / Title _____
School / Firm / Organization _____
Telephone Number _____

PRINCIPAL'S AGREEMENT

(Minimum 84 numeric average is required.)

Applicant's numeric grade average is _____.

I support this student's application to Youth Leadership Henry and understand the attendance requirements of the program.

Signature of the Principal _____ Date _____

APPLICANT'S COMMITMENT

I understand the purposes and requirements to the Youth Leadership Henry program. If I am selected, I will **participate as required** to complete the program. I understand that any student who misses more than one of the six monthly sessions will not receive a certificate of completion at the conclusion of this year's program. I understand the minimum grade average necessary for participation in this program is an 84. I also understand that a one time fee of \$50 is required of participants (after acceptance) to help offset the cost of the program. In signing this application, I acknowledge that I understand the program requirements and I make a commitment to honor them.

Signature of Applicant _____ Date _____

PARENTAL CONSENT

I give permission for my child to participate in the Youth Leadership Henry program, if accepted.

Signature of Parent / Guardian _____ Date _____

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STUDENTS WHO ARE SELECTED FOR PARTICIPATION IN THE YLH PROGRAM
WILL BE NOTIFIED IN WRITING BY THE SELECTION COMMITTEE.