



APPLICATION FORM

Name: Last: First: MI:

Name you prefer to be called: Home Phone:

School: Grade in School (2016-2017):
10
11
12

Polo Shirt Size: (Adult Sizes) S M L XL

Food Allergies/Special Diet/Vegetarian

Email:

Home Address:

City: State: Zip:

Parents/Guardians:

Parents/Guardians daytime phone (in case of emergency):

Referred by: Parent School Staff Word of Mouth
Media Alumni
Other _____

1. Why are you applying for the Cass County Youth Commission?

2. How do you think your involvement in the Cass County Youth Commission will help you impact the future of your community?

3. Describe an issue/ concern facing your community. Explain how having leadership skills might help you make a difference in the situation.

4. Name an individual that, in your mind, you see as a leader and why you see this person as a role model. Also, what qualities in yourself mirror some of the qualities you see in this person?

Involvement

List your involvement in other school/ community/work activities.

Of the school/ community/work activities that you listed above, which one(s) give you the most satisfaction? Why?

Commitment

To successfully complete the Cass County Youth Commission program, a participant must complete a total of 30 hours of participation through: 1) attending all sessions and graduation, and 2) completing assigned hours of community activities outside the sessions.

I agree to the attendance policy and commitment.

Student Signature:

Date:

As parent/guardian of this applicant, I support his/her participation and commitment to the Cass County Youth Commission.

Parent/Guardian
Signature:

Print name of Parent/
Guardian:

Applicant must have a minimum 2.0 GPA to apply.

Signature of School
Official:

Print Name & Title of
School Official:

Deadline to apply is April 29, 2016 at the school you attend.

Selections will be made by May 6, 2016.