Youth Civic Leadership Experience
A Port Orange South Daytona Chamber of Commerce Program

Application

Program Overview: The Youth Civic Leadership Experience is an intensive one-week summer program designed to teach community leadership and civic engagement by immersing students in the Port Orange government and local business community. The program is designed to develop informed individuals through field trips, interactive seminars, and face-to-face meetings with key community leaders.

Selection Criteria:

- Rising Sophomore or Junior in Port Orange/South Daytona High School or PO/SD Resident
- Minimum cumulative GPA of 2.0
- Demonstrates commitment to community leadership and involvement
- Demonstrates personal integrity and responsibility
- Must attend entire week of program
- Must have daily transportation to/from POSD Chamber of Commerce
- Must have parental consent

Application Requirements:

1. **Questionnaire**: Be thorough and thoughtful in your responses to the attached questionnaire.

2. **Letters of Reference/Teacher Recommendation**: Applicant must have two letters of reference or teacher recommendations. Please provide the attached form to your teacher/supervisor with enough time to complete by the application deadline.

3. **Commitment/Consent Signatures**: Applicant must read and sign the attached commitment form. Parent or guardian must read and sign the attached consent form.

Important Dates:

Friday March 27, 2020 – **ALL APPLICATIONS DUE** - Completed packets are due to the Port Orange South Daytona Chamber of Commerce (3431 Ridgewood Avenue, Port Orange, FL 32129 Tel:(386) 761-1601

Wednesday April 22, 2020 – Program participants notified of acceptance. $50 fee due upon acceptance.

Friday, May 29, 2020 – 9am-3pm – T-shirts and orientation packets available for pickup at the POSD Chamber of Commerce Riverside Pavilion. Packets will also be available Monday June 1st.

Monday June 1, 2020 – Friday June 5, 2020: Program runs daily 8:00am – 3:00pm. Pick up and drop off at the POSD Chamber of Commerce Riverside Pavilion (3431 Ridgewood Ave, Port Orange 32129).
PERSONAL INFORMATION:

Last Name: _____________________  First Name: _____________________  Age: __________

Home Address: _____________________  City: _____________________  Zip: __________

Email: _____________________  Cell Phone: _____________________  T-shirt Size: ________

School Name: _____________________  Grade: ________

Name of Parent/Guardian: __________________________________________________________

Home Phone: __________  Parent Work Phone: __________  Parent Cell Phone: __________

Parent Email: _____________________________________________________________

Cumulative GPA: __________

Scholarship Requested: Yes  No  Free/Reduced Lunch: Yes  No

Special requirements: dietary, physical or other

________________________________________

________________________________________

COMMUNITY INVOLVEMENT:  (Please include leadership positions held):

Interests/Hobbies/Employment:

________________________________________

________________________________________

________________________________________

High School Activities:

________________________________________

________________________________________

________________________________________

Community/Church/Volunteer Activities:

________________________________________

________________________________________

________________________________________
SHORT ANSWER QUESTIONS:

1. What are your reasons for applying for the Youth Civic Leadership Experience? What unique contribution will you bring to the group? What would you like to gain from this program?

__________________________________________
__________________________________________
__________________________________________
__________________________________________

2. What are the most important qualities of an effective leader? What does leadership mean to you? Describe a time you have had the opportunity to test your leadership abilities.

__________________________________________
__________________________________________
__________________________________________
__________________________________________

3. Name a person who has had a tremendous impact on you. Describe how and why this person impacted your life.

__________________________________________
__________________________________________
__________________________________________
__________________________________________

4. What do you see as a significant challenge facing your community? Please share your ideas for addressing this challenge.

__________________________________________
__________________________________________
__________________________________________
__________________________________________
COMMITTMENT/CONSENT

APPLICANT:

I hereby certify that all information contained in this document is true and accurate to the best of my knowledge. I hereby give consent to Youth Civic Leadership Experience to access and release all the above information, including my photograph, as necessary to conduct Youth Civic Leadership Experience business and promotions. I understand and agree that if I am selected to participate in this program, I will be required to attend every session in its entirety and to participate fully in all activities.

Printed Name ______________________________ Date ______________

Applicant Signature _______________________________________________
Youth Civic Leadership Experience

Letter of Recommendation

Applicant Name: ___________________________ Grade Level: ____________

What is your association with this applicant? __________________________________________

The Youth Civic Leadership Experience is an intensive one-week summer program designed to teach community leadership and civic engagement by immersing students in the Port Orange government and local business community. Students will interact with the leaders and business partners of our community, learning the unique characteristics of our region and the challenges faced while growing and maintaining a vibrant, healthy community. Please respond to the following inquiries, keeping in mind the objectives outlined above.

Please assess the applicant in the following areas:

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<th>No Opinion</th>
<th>Below Average</th>
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<th>Above Average</th>
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<td>Possesses leadership potential</td>
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<td>This student will represent our school well in the Youth Civic Leadership Experience</td>
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Please comment on your observations of this applicant’s leadership potential.

This program focuses on developing civic engagement. Briefly explain how this student could contribute to and benefit from the goals of this program.

Provide any other comments pertinent to evaluating this applicant’s suitability for the YCLE.

I recommend this student for the Youth Civic Leadership Experience. I believe he/she has the potential leadership skills, which can be enhanced or developed by participation in the program. I believe that the applicant will demonstrate dedication, enthusiasm, and service to school and community.

Name: ___________________________ Position/Title: ___________________________
Signature: ___________________________ E Mail Address: ___________________________
Youth Civic Leadership Experience
Letter of Recommendation

Applicant Name: ____________________________ Grade Level: _________

What is your association with this applicant? ________________________________

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