

Your Name _____

Phone _____ Age _____ Grade Next Year _____

High School _____



Teen Leadership Santa Maria Valley **2009-2010**

Open to 2009-2010 Sophomores & Juniors

Application Deadline Noon June 1, 2009

2 References & Signed By Parents & School Principal

Please make a copy for your records

Turned into Santa Maria Valley Chamber of Commerce, 614 S. Broadway

Call Cary Gray @ 934-5956 with any questions

<http://www.lsmv.org/Teen-Leadership.htm>

“Because our students are one of the most important capital investments we can make in the future prosperity and quality of life in our beloved Santa Maria Valley”

Cary Gray

A Leadership-Training and Citizenship-Building Program of:
United Way of Northern Santa Barbara County,
Santa Maria Valley Chamber of Commerce & Visitors Bureau,
Santa Maria Joint Unified High School District,
& Leadership Santa Maria Valley

There are no fees or tuition to attend the program.

There is no minimum GPA to apply.

We are supported by grants, scholarships and donations.



Teen Leadership Santa Maria Valley

Participant Agreement:

Name _____

If selected, you agree to commit to 100% participation in all events.

MAKE SURE YOU CHECK YOUR SCHOOL AND FAMILY CALENDAR FOR CONFLICTS.

As a participant of the Teen Leadership Santa Maria Valley, I agree to complete individual independent study contracts for any school day missed due to the scheduling of such days. I understand that I cannot miss more than two school days in my participation of this program.

I am willing to volunteer additional time on committees necessary to fulfill program needs, (class projects, yearbook committee, alumni web site committee, fundraiser committee, etc.)

Student's Signature _____ Date _____

For any questions regarding the program or events, please contact the

Teen Leadership Santa Maria Valley Board Chair

Mr. Cary Gray 805-934-5956 805-570-0620

CaryGray@Assessments-USA.com

Circle Your T-Shirt Size: S M L XL XXL Are you Vegan? Yes No Vegetarian? Yes No

For Our Career Exploration Day: Would your Parents, Grandparents, Aunts and/or Uncles be interested in being interviewed by the class members?

Name _____ **Occupation** _____ **Phone** _____

Name _____ **Occupation** _____ **Phone** _____

Name _____ **Occupation** _____ **Phone** _____

Name _____ **Occupation** _____ **Phone** _____

Do you currently have a part time job?_____ How many hours per week? _____ If selected for the Teen Leadership Santa Maria Valley Program, how would you manage your work schedule?

Personal Information:

Explain what your family/home responsibilities consist of:

Using a few phrases or adjectives, describe yourself?

Who is your hero or heroine (someone you admire)? Why?

What are your leisure time activities?

What are your main areas of interest in studies? _____

What career interests do you have? _____

Community Assessment:

In your opinion, what responsibility do teens have to help solve community problems?

If you could change anything in the Santa Maria Valley, what would it be and why?

What community class project(s) would you like to lead or participate in?



Attendance:

If selected, you commit to attend the program orientation, the opening overnight weekend retreat, each one of the eight topic days, and the class graduation. Attendance for the entire topic day is mandatory for each participant. This will ensure the Teen Leadership Program meets its objectives. Additional meetings may be necessary outside the normal school day for your class projects. Teen Leadership Santa Maria Valley is working with the high schools to get school attendance credit. Please check the program calendar dates in this application to see which topic days are school vacation days and which topic days are excused school days. I understand and accept the attendance requirements for Teen Leadership Santa Maria Valley and I will make sure my teachers are notified and all assignments are completed.

Student Signature _____ Date _____

Parent Acknowledgement _____ Date _____

References:

Please give the attached reference forms to two adults who know you well, excluding parent/guardian and relatives (example: a teacher, religious leader, club advisor, supervisor, etc.). These forms are very important. We will not accept your application unless we receive two reference forms with your application.

Independent Study:

As a participant of Teen Leadership Santa Maria Valley, I agree to complete individual independent study contracts for the school days missed due to scheduled Topic Days.

Student Signature _____

Conclusion:

How did you find out about Teen Leadership Santa Maria Valley? (Check one)
 Friend Teacher Counselor Newspaper Parent Other (describe) _____

Why do you want to participate in Teen Leadership Santa Maria Valley?

What else would you like to tell us about yourself?



Parent Permission:

I am the parent/guardian of _____ . I have read the information on the Teen Leadership Santa Maria Valley Program and am willing to have my teenager participate. Teen Leadership Santa Maria Valley, its agents and its employees have my full permission and consent to transport and otherwise provide transportation for my child by school bus, public service bus, private automobile, vans or other appropriate means of transportation in connection with all sessions of Teen Leadership Santa Maria Valley during the school year in which they participant. I hereby release and hold harmless the Teen leadership Board of Directors, the Northern Santa Barbara County United Way, the Santa Maria Joint Unified High School District, the Santa Maria Valley Chamber of Commerce, its members, agents, employees or any individuals involved in the planning, organization or presentation of Teen Leadership Santa Maria Valley 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 Teen Leadership Santa Maria Valley.

Father/Legal Guardian Name (Please print) _____

Signature of Father/Legal Guardian _____

Home Phone _____ Work Phone _____

Address _____ City _____ Zip _____

AND/OR

Mother/Legal Guardian Name (Please print) _____

Signature of Mother/Legal Guardian _____

Date _____ Home Phone _____ Work Phone _____

Address _____ City _____ Zip _____

Best time to contact parent/legal guardian: AM or PM Phone Number _____

School Approval:

All applicants MUST have the approval of their school principal to attend the nine sessions of Teen Leadership Santa Maria Valley. Please have your principal sign below:

I approve of the participation of _____ in the Teen Leadership Santa Maria Valley program. The student meets the criteria of being academically sound.

Principal Name _____
(Please print)

School _____ Phone _____

Signature of Principal _____ Date _____



Teen Leadership Santa Maria Valley

ATHLETIC DEPARTMENT ACKNOWLEDGEMENT

Any student wishing to participate in Teen Leadership Santa Maria Valley and who is also planning on participating on a school sport must get their coach to sign off acknowledging the program dates. Take this form and the list of topic days to your athletic director and they will direct you to the coaches who need to sign off on this form.

This form needs to be completed and turned in with your application in order for the Selection Board to set up your interview.

Student's Name _____

I have reviewed the teen leadership topic days on the next page and the student is excused from practice.

Athletic Director's Acknowledgement _____

NO SPORTS INVOLVED	Director's Acknowledgement _____
Basketball	Coach Acknowledgement _____
Cross Country	Coach Acknowledgement _____
Football	Coach Acknowledgement _____
Golf	Coach Acknowledgement _____
Soccer	Coach Acknowledgement _____
Water Polo	Coach Acknowledgement _____
Softball	Coach Acknowledgement _____
Swim	Coach Acknowledgement _____
Tennis	Coach Acknowledgement _____
Track	Coach Acknowledgement _____
Volleyball	Coach Acknowledgement _____
Wrestling	Coach Acknowledgement _____
Band	Directors Acknowledgement _____
Choir	Director's Acknowledgement _____
Other _____	Coach Acknowledgement _____



**Teen Leadership Santa Maria Valley
2009-2010 PROGRAM SCHEDULE**

Please make a copy for your parents and your records

2009

July 27th	Monday	Program Orientation for Parents & Teens	
August 17th	Monday	Program Orientation for Parents & Teens	
September 26-27	Sat-Sun	2-Day Mandatory Overnight Retreat	(WE)
October 12th	Monday	Health & Human Services	(EOD)
November 2nd	Tuesday	Economics & The Media	(SDD)
December 21st	Monday	Diversity & Ethics	(Holiday)

2010

January 11th	Monday	Quality of Life & The Arts	(SWD)
February 1st	Monday	Military & Aerospace	(SDD)
March 22nd	Monday	Education & Careers	(EOD)
April 9th	Friday	Government & Law	(NCD)
May 24rd	Monday	Energy & Environment	(EOD)
June 20th	Sunday Evening	Graduation (TBD)	
	5 PM -8 PM	Reception for Family & Community	

(WE) Week End (SWD) Staff Work Day No School (SDD) Staff Development Day

(EOD) Early Out Day (NCD) Topic Day is a No Class Day

Topic Days Are Generally 7:30 AM to 4:15 PM

Days Are Planned to Get Students Back to Their After-School Activities

Each Topic Day Includes a 30-60 Minute Block of an Appropriate Leadership Training



Teen Leadership Santa Maria Valley

Reference Form

DATE STUDENT NEEDS FORM BACK BY: _____

STUDENT NAME _____

TO THE STUDENT'S REFERENCE: The student listed above is an applicant for the Teen Leadership Santa Maria Valley program. It is an interactive, hands-on, leadership-training and citizenship-building experience with the community, aimed at high school Sophomores and Juniors who are beginning to show leadership potential and an interest in serving their community. The Selection Committee attaches considerable weight to the statements made by the references of the applicant. The committee is aware of the time necessary to prepare such an assessment and gratefully acknowledges your help. Please print or type in ink. Use this form only, no additional paper! Application will be reviewed in confidence.

Name of Adult Reference _____

Position/Title _____

School/Business/Religious Group/Organization _____

Address _____ City _____ State _____ Zip _____

Work Phone _____ Home Phone _____

1. Length of time you have known the applicant? How do you know the applicant?

2. What do you consider to be the applicant's primary talents or strengths?

3. Comment on the applicant's relationship with his/her peers:

4. Please describe one situation where you observed the applicant in a leadership role:

5. Check up to 4 characteristics that best describe the applicant:

_____ Responsible	_____ Leadership	_____ Initiative	_____ Creative
_____ Curious	_____ Character	_____ Mature	_____ Persistent
_____ Able to work with others	_____ Concern for others	Other _____	
_____ Oral communication skills	_____ Interest in community affairs	Other _____	

6. What else would you like to say about the applicant?

Signature of Reference

Date

Please get this form back to the student as soon as possible.

Applicant will not be considered unless this and all other forms are submitted by the Noon June 1, 2009 deadline.

**MAKE A COPY OF THIS FORM AND GIVE TO EACH OF YOUR TWO REFERENCES
Remember to give them a deadline to complete the form so you can get your entire
application to the Chamber of Commerce by the Noon June 1, 2009 deadline.**



Teen Leadership Santa Maria Valley

Reference Form

DATE STUDENT NEEDS FORM BACK BY: _____

STUDENT NAME _____

TO THE STUDENT'S REFERENCE: The person listed above is an applicant for the Teen Leadership Santa Maria Valley program. It is an interactive, hands-on, leadership-training and citizenship-building experience with the community, aimed at high school Sophomores and Juniors who are beginning to show leadership potential and an interest in serving their community. The Selection Committee attaches considerable weight to the statements made by the references of the applicant. The committee is aware of the time necessary to prepare such an assessment and gratefully acknowledge your help. Please print or type in ink. Use this form only, no additional paper! Application will be reviewed in confidence.

Name of Adult Reference _____

Position/Title _____

School/Business/Religious Group/Organization _____

Address _____ City _____ State _____ Zip _____

Work Phone _____ Home Phone _____

1. Length of time you have known the applicant? How do you know the applicant?

2. What do you consider to be the applicant's primary talents or strengths?

3. Comment on the applicant's relationship with his/her peers:

4. Please describe one situation where you observed the applicant in a leadership role:

5. Check up to 4 characteristics that best describe the applicant:

_____ Responsible	_____ Leadership	_____ Initiative	_____ Creative
_____ Curious	_____ Character	_____ Mature	_____ Persistent
_____ Able to work with others	_____	Concern for others	Other _____
_____ Oral communication skills	_____	Interest in community affairs	Other _____

6. What else would you like to say about the applicant?

Signature of Reference

Date

Please get this form back to the applicant as soon as possible.

Applicant will not be considered unless this and all other forms are submitted by their Noon June 1, 2009 deadline.

**MAKE A COPY OF THIS FORM AND GIVE TO EACH OF YOUR TWO REFERENCES
Remember to give them a deadline to complete the form so you can get your entire
application to the Chamber of Commerce by the Noon June 1, 2009 deadline.**

Teen Leadership
Santa Maria Valley

CHECK LIST FOR COMPLETING APPLICATION

- [] Your application form is filled out completely and correctly.
- [] You have asked two adults (excluding relatives/guardian) to fill out reference forms.
- [] You have picked up your two completed reference forms and have attached them to your application.
- [] Your application has been signed by your parents or legal guardians.
- [] Your application has been signed by all your extra-curricular coaches.
- [] Your coaches each have a list of the topic days you will miss their practice.
- [] Your application has been signed by your school principal.
- [] You have made a personal copy of the application for you and your parents.
- [] Please call Cary Gray at 934-5956 to let him know you are interested in the program and are currently completing the application and will make the deadline.
- [] Your application was submitted to the Santa Maria Chamber of Commerce by NOON on June 1, 2009.