

Roane County Youth Leadership (RCYL)

Class of 2022 Check Off Sheet and Consent Form

The documents included (10 pages total) must be completed and turned in together and received no later than the deadline date of **February 15, 2022** to be considered for the Roane County Youth Leadership Program. Your packet of documents may be mailed or taken to the Roane County Chamber of Commerce, Att: Youth Leadership (1209 N. Ky. St., Kingston, Tn. 37763) **or** scanned and emailed to <u>roaneyouthleadership@gmail.com</u>

Failure to turn in any document will disqualify a student. Read application carefully!

| Document Title | Check Off When Included |
|---|-------------------------|
| Pages 1 & 2 Check Off Sheet <u>AND</u> Consent Form | |
| Page 3 Application | |
| Pages 4 & 5 Educator Reference Form | |
| Pages 6 & 7 Community Reference Form | |
| Pages 8 Principal Permission Form | |
| **A wallet size school photo or other head shot | |

Requirements to complete the program include:

- 1. Attendance at the one week camp held during the summer 2022, usually the first week of June. (exact dates and time to be announced)
- 2. Attending 2 Roane County civic meetings (Ro. County Commission, Ro. Co. School Board or a City Council meeting) after summer camp but no later than November 2022.
- 3. Attending after school sessions that will be held between September 2022 thru November 2022. (exact dates and time to be announced)
- 4. Work with other RCYL participants to complete a community service project.

In order to graduate the RCYL program, the participant must be present at four of the five days of the camp, (Monday is mandatory) attend the civic meetings as well as all of the after school meetings. Graduation will occur in the fall.

1

| Ackn | owledgement and Conse | ents (please check signif | ying agreement) |
|--|---|---|--|
| | If selected, I commit to at work on a community ser | • | p, civic meetings, after school sessions, he graduation. |
| | I understand that I will page | y a participation fee of \$4 | 10.00 |
| | I give my permission for n County News, in marketing | , , , , | d on the RCYL website, by the Roane or on social media. |
| either | _ | | am a high school student who will be in cademic year in Roane County, |
| I | | the parent/legal g | uardian of |
| (1 | Print Parent or Guardian N | lame) | (Print Student Name) |
| conse durino I here the pl injury activit | ent to transport my child by g the year in which he/she by release, indemnify, and anning, organization or pro , illness, or damage whats by or session of Roane Con | appropriate transportation is a participant. If hold harmless RCYL, the sentation of Roane Couloever related to the about the county Youth Leadership. | eir agents have my full permission and on in connection with all sessions of RCYL neir agents or any individuals involved in anty Youth Leadership for any accident, ve-mentioned student's participation in any |
| <u>Paren</u> | t/Legal Guardian: (Print Nam | ne) | |
| Pare | nt Signature: | | Date |
| Addre | ss | Home Phone | Work Phone |
| <u>Stude</u> | nt Name: (Print Name) | | |
| Stud | ent Signature: | | Date |

Students must also complete and sign top portion on pages 6 and 8. Participants will be notified if accepted by March 31, 2021.

KEEP A COPY OF PAGES 1 FOR REFERENCE AND AS A REMINDER OF YOUR REQUIREMENTS IF SELECTED.



Roane County Youth Leadership (RCYL)

Class of 2022 Application

| | Current Grade: _ | 9th10 th 11th |
|-----------------------------|---|--|
| | | |
| First | Middle | Preferred Name |
| | | |
| Street | City | Zip Code |
| | | |
| Home | Cell Phone I | Number |
| | Birt | h Date// |
| Female Male | e Race/Ethnicity (Op | tional) |
| | | |
| Name | | |
| aytime Phone Number(s) | in case of emergency. | |
| | #2 | |
| | | |
| | | |
| | | |
| | | |
| ities: (sports, band, cheer | r, etc.) | |
| themselves to program | day site: □ Yes □ No | |
| , , | • | |
| | , | |
| | Street Home Female Male Name aytime Phone Number(s) Ty Restrictions/Special Act Ty Restri | First Middle Street City Home Cell Phone Birt Female Male Race/Ethnicity (Op Name aytime Phone Number(s) in case of emergency. #2 Ty Restrictions/Special Accommodations Request Street City Middle Birt Female Male Race/Ethnicity (Op Name aytime Phone Number(s) in case of emergency. #2 Ty Restrictions/Special Accommodations Request Street City Home Cell Phone Birt Female Male Race/Ethnicity (Op Name aytime Phone Number(s) in case of emergency. #2 Ty Restrictions/Special Accommodations Request Street City When Electronic City Street City When Electronic |

REFERENCES REQUIRED - SCHOOL AND COMMUNITY:

Please provide the attached reference form to your high school teacher or guidance counselor. Give the community form to an adult who knows you well other than a parent, relative or school official. (Ex. - Your church youth leader, neighbor, employer, etc.) Please provide the reference form immediately upon getting this application as a courtesy to the individual you are requesting a reference from.



REFERENCE FORM - School

(Teacher or Guidance Counselor)

Roane County Youth Leadership (RCYL)

TOP PORTION FOR THE STUDENT APPLICANT TO COMPLETE

| Name | | | , | |
|------------|---------------------------------|----------------------------|--------------------------------------|----|
| | Last | First | School | |
| As a court | esy to your reference, please r | nake your request immediat | ely upon getting this application. T | he |

comments will be held in strict confidence and will be used for RCYL selection purposes only. You are responsible for picking the form up from your reference and returning it with your application packet.

TO THE REFERENCE:

The person listed above is an applicant for the Roane County Youth Leadership Program. It is a program that gives area high school students a chance to enhance their knowledge of Roane County and develop leadership skills that will encourage and motivate them to become involved and committed to 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 type or print in the spaces provided.

Please return these two (2) reference form sheets <u>in a sealed envelope</u> to the student in time for her/him to submit the application no later than <u>February 15, 2022</u> (or email them to <u>roaneyouthleadership@gmail.com</u> before 2/15/2022)

Thank you for your time and commitment to the continued growth and development of the Youth in Roane County.

REFERENCE FORM- SCHOOL Teacher or Guidance Counselor

| Name of Person Giving this Reference | | | | |
|--------------------------------------|--|--|--|--|
| Po | Position/TitleSchool | | | |
| Ma | Mailing Address | | | |
| TH | IS REFERENCE IS FOR: | | | |
| 1. | How long and in what capacity have you known the applicant? | | | |
| 2. | What would you consider the applicant's primary talents or strength? | | | |
| 3. | Comment on the applicants' potential to successfully complete the course (commitment, attendance, punctuality) | | | |
| 4. | Comment on the applicant's relationship with his/her peers | | | |
| 5. | Please describe one situation where you observed the applicant in a leadership role. | | | |
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OTHER INFORMATION MAY BE INCLUDED ON REVERSE SIDE OF PAPER.

If you have any questions, please feel free to call the Roane County Chamber office regarding Roane County Youth Leadership program at (865) 376-5572 or email roaneyouthleadership@gmail.com



TOP PORTION FOR THE STUDENT APPLICANT TO COMPLETE

| Name | | | | |
|--|----------------------------------|--------------------------------|----------------------------------|--|
| | Last | First | School | |
| As a courtesy to your reference, please make your immediately upon getting this application. The | | | | |
| comments | will be held in strict confidend | ce and will be used for RCYL s | selection purposes only. You are | |
| responsible | e for picking the form up from | your reference and returning | it with your application packet. | |

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Thank you for your time and commitment to the continued growth and development of the Youth in Roane County.

REFERENCE FORM- COMMUNITY

| Name of Person Giving this Reference | | | | |
|--------------------------------------|--|--|--|--|
| Pos | Position/TitleBusiness/Religious Group/Organization | | | |
| Ма | iling Address | | | |
| | IS REFERENCE IS FOR: | | | |
| | How long and in what capacity have you known the applicant? | | | |
| 2. | What would you consider the applicant's primary talents or strength? | | | |
| 3. | Comment on the applicants' potential to successfully complete the course (commitment, attendance, punctuality) | | | |
| 4. | Comment on the applicant's relationship with his/her peers. | | | |
| 5. | Please describe one situation where you observed the applicant in a leadership role. | | | |
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Roane County Youth Leadership (RCYL)

Class of 2022 Principal Consent/Recommendation

| STUDENT NAME: | |
|--|--|
| • | urrent school principal to participate in the Roane quest your principal to complete and sign below: |
| the 2022 Roane County Youth Leadership pro | as a participant in gram. This student is in good standing and will be a sophomore, junior or senior during the |
| Requirements to complete the program include | e: |
| June. (exact dates and time to be ann 2. Attending Roane County civic meeting (County Commission, City Council and 3. Attending after school sessions that w November 2022. (exact dates and tim 4. Work with other RCYL participants to | gs after the camp but no later than November 2021 d/or School Board meetings.) rill be held between September 2022 thru e to be announced) complete a community service project. |
| Name: | Position: |
| School: | |
| Signature: | Date: |

Please return this completed form to the student or it may be emailed to roaneyouthleadership@gmail.com

All documents must be received before the deadline of February 15th, 2022.

If you have questions, you may contact the Roane County Chamber regarding the Roane County Youth Leadership program at (865-376-5572) or email - roaneyouthleadership@gmail.com