



A program of the Flagler County Chamber of Commerce

## **CLASS OF 2014-15 APPLICATION PACKET**

Included in this Application Packet:

1. Program Information
2. Program Calendar
3. Application Form
4. Reference Form

Important: Be sure to have signed by:

- Student
- Parent/Guardian
- School Official

### **YOUTH LEADERSHIP FLAGLER MISSION**

Developing the Flagler County youth of today to become successful community leaders of tomorrow.

### **INFORMATION FOR HIGH SCHOOL SOPHOMORES**

**ALL APPLICATIONS ARE DUE TO THE FLAGLER COUNTY CHAMBER OF COMMERCE  
BY MARCH 14, 2014**

Youth Leadership Flagler, Flagler County Chamber of Commerce  
20 Airport Road, Suite C, Palm Coast, FL 32164  
Phone (386) 437-0106 • Fax (386) 437-5700  
[www.flaglerchamber.org](http://www.flaglerchamber.org)

# PROGRAM OVERVIEW

Please review the following information before completing your application form.

## COMMITMENT

- Students in the Youth Leadership Flagler program must commit to a high standard of attendance and participation in the retreat and program sessions. Please note the dates on the program calendar. Being absent for more than 8 unexcused hours will result in dismissal from the program.
- **Please be sure that you DO NOT have any conflicts with the program calendar before applying.** The Flagler County School System gives Youth Leadership Flagler students excused absences for all activities.
- **If you plan to dual enroll with the Daytona State College, please do not apply to this program** as the college will not give excused absences for program days.
- Students must provide proof of at least 5 hours of community service between August 2013 & March 2014.

## ELIGIBILITY

- Flagler County resident.
- Apply in the high school sophomore year for participation the junior year. (We will consider two students who are home schooled or attending private schools outside of Flagler County)
- Have a minimum of a 2.0 unweighted cumulative grade point average at the time of application, which must be maintained during the program. (Students will receive excused absences for missed school days).
- Demonstrate a high standard of character, behavior, interest &/or leadership skills in extracurricular activities.
- Have an interest in learning about community issues and ways to lend leadership.

## APPLICANT CHECK LIST

- Submit your application before March 15th. **Applications are available online at [www.flaglerchamber.org](http://www.flaglerchamber.org)** or by visiting the Flagler County Chamber of Commerce during regular business hours.
- Fill out the application form completely.
- All signatures are required.
- You may email, fax, mail or drop off your completed application no later than March 14, 2014 to Youth Leadership Flagler, Flagler County Chamber of Commerce, 20 Airport Road, Suite C, Palm Coast, Florida 32164.
- ALL APPLICATIONS ARE DUE TO THE CHAMBER OF COMMERCE BY MARCH 14, 2014.**

## SELECTION PROCESS

- All applications will remain confidential.
- The Youth Leadership Flagler Selection Team will review the applications and select the finalists.
- Finalists will be interviewed during **April 7-11, 2014.**
- 10 participants will be selected (4 from Flagler Palm Coast High School, 4 from Matanzas High School and 2 others if applicable from home school or private school).
- All applicants will be notified in writing of the Selection Team's decision by **Friday, April 25, 2014.**

## EXCUSED ABSENCES WILL BE GRANTED FOR EACH SCHOOL DAY SESSION ATTENDED.

- Students are responsible for their own transportation to and from the assembly point. Transportation during each session will be provided. The pick-up location is always the same as the drop-off location.
- On program days held from 1:00 PM to 4:30 PM, planners will be there by 12:30 PM if you are being dropped off early.
- Always wear your Youth Leadership Flagler shirts, name tags, comfortable walking shoes and nice slacks, capris or skirts. (No shorts or flip flops please.) Air conditioned buildings can get cold, so consider bringing a sweater. Be prepared for rain.
- If you get lost, you can call 386-437-0106 for directions.

## TUITION AND SCHOLARSHIPS

If selected, the cost per participant is \$25.00 (payable to the Flagler Chamber Foundation by June 4, 2013). This fee is non refundable. **If payment is not received by this date, an alternate will be selected in your place.**

Scholarship Information is available upon request. For more information please contact the Flagler County Chamber at (386) 437-0106.

# PROGRAM CALENDAR FOR 2014 - 2015

Schedule may be subject to change.

**THURSDAY, MAY 22, 2014, 6:30 – 8:00 PM**

**Opening Reception/Orientation – Chamber of Commerce (Flagler Room)**

**SATURDAY, SEPTEMBER 13, 2014, 8:00 AM – 2 PM LUNCH INCLUDED**

**Opening Retreat at Flagler Palm Coast High School**

The first session would encourage class participation, cooperation and learning through group exercises, explanation and completion of the DISC assessment, and a guided discussion about what makes a good leader. Select chamber members would be asked to join the session to share examples from their own experiences as business leaders and owners.

**WEDNESDAY, OCTOBER 15, 2014, NOVEMBER 12, 2014 AND DECEMBER 10, 2014**

**History of the Industries in Flagler County**

Participants would gain a better understanding of the industries that played key roles in Flagler County's evolution, from its early agricultural roots, through the real estate boom to today's efforts to drive future growth. The sessions will spend considerable time exploring three currently relevant industries: agriculture, real estate and healthcare. Specific attention will be paid to illustrating how current demographics impact these segments and what this means for the future of our community.

**WEDNESDAY, JANUARY 14, 2015**

**Technology in Government Day**

Participants will see how local businesses and government entities use technology to improve operating efficiencies, while on a "behind the scenes" guided tour of the Government Services Building & Flagler County Courthouse. The students will have an opportunity to interact with local elected officials, including the mayors of Palm Coast, Bunnell and Flagler Beach.

**WEDNESDAY, FEBRUARY 18, 2015**

**Natural Resources Day**

Participants will tour the water plant & local "green" facilities to gain an appreciation of local efforts to become one of the most environmentally friendly and green communities in Florida. Additionally, this session will explore how this eco-friendly movement will help drive future economic growth and development.

**WEDNESDAY, MARCH 18, 2015**

**Culture & Tourism Day**

Candidates will get enjoy a closer look at the Flagler Arts industry. The itinerary will continue to Hammock Beach Resort and Marineland Dolphin Adventure to see why thousands of visitors come back every year to enjoy Flagler County and what it has to offer.

# YOUTH LEADERSHIP APPLICATION FORM

All applicants and school officials will be notified in writing of the selection committee's decision. Please return application to:  
Youth Leadership Flagler, Flagler County Chamber of Commerce, 20 Airport Road, Suite C, Palm Coast, FL, 32164  
Email: [kathy@flaglerchamber.org](mailto:kathy@flaglerchamber.org) or Fax: (386) 437-5700

It is preferred that you download this form, save to your computer, type in the blanks, and print to sign on signature lines.  
However, if this is for some reason not possible, **PLEASE PRINT WITH BLUE OR BLACK INK.**

## PERSONAL INFORMATION

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Name you prefer to be called \_\_\_\_\_

Your Email \_\_\_\_\_ Guardian's Email \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ US Citizen Y/N \_\_\_\_\_

How Long have you lived in Flagler County? \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex M/F \_\_\_\_\_ Highschool \_\_\_\_\_

*Must be high school sophomore*

## RECOGNITIONS

List awards, honors or recognitions for school or community-related activities you have received over the last two years (use space below only).

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## ORGANIZATIONS AND ACTIVITIES

Please list (in order of importance to you) up to five school, volunteer, religious, social, athletic or other activities in which you have participated during the last two years. Include any leadership roles in those.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

# YOUTH LEADERSHIP APPLICATION FORM

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## WORK EXPERIENCES

List any job experiences, paid or volunteer, and briefly tell what they entailed.

Do you currently have a part-time job? \_\_\_\_\_

## GENERAL INFORMATION

1. What would you like to tell us about yourself? \_\_\_\_\_

2. Who is your hero or heroine? Why? \_\_\_\_\_

3. What qualities do you admire in others? \_\_\_\_\_

4. What do you enjoy doing in your leisure time? \_\_\_\_\_

5. What is your favorite subject school and why? \_\_\_\_\_

6. Why do you want to participate in Youth Leadership Flagler? \_\_\_\_\_

7. Which session listed on the program calendar interests you most? Why? \_\_\_\_\_

8. How did you find out about Youth Leadership Flagler? \_\_\_\_\_

## **ESSAY TOPIC: "COMMUNITY NEEDS AND ISSUES THAT ARE IMPORTANT TO ME." AS AN EXAMPLE, IF YOU COULD CHANGE ANYTHING IN YOUR COMMUNITY, WHAT WOULD IT BE AND WHY?**

Please respond to the question in 100 words or less. (Use space below only or attach a separate sheet if preferred.)

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## STUDENT ATTENDANCE COMMITMENT

Full attendance by each participant is essential in the Youth Leadership Flagler Program to meet its objectives. I have read the program calendar dates on the enclosed information sheet. If selected, I commit to attend the opening reception, the retreat, each of the program days, the community service hours and the graduation ceremony. I understand that by missing more than 8 hours of unexcused absence by the Flagler Chamber of Commerce will result in dismissal from the program.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

# YOUTH LEADERSHIP APPLICATION FORM

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## PARENTAL PERMISSIONS (PLEASE INITIAL EACH LINE AND SIGN AT THE BOTTOM)

I am the parent or guardian of the named below student.

\_\_\_\_\_ I understand the time commitment of Youth Leadership Flagler (YLF), and that my child will receive an excused absence for school days missed. My child will not miss more than 8 hours of YLF without approval from the Flagler County Chamber of Commerce. If my child misses more than 8 hours, it will result in his/her dismissal from the program.

\_\_\_\_\_ YLF has my full permission and consent to transport my child by public service bus, private automobile, van or other appropriate means of transportation to all sessions of Youth Leadership Flagler during the school year in which he or she is a participant.

\_\_\_\_\_ I give the Flagler County Chamber of Commerce the right to take my child's photo/video at all of the YLF events and sessions. These images will be used to advertise YLF in promotional material in print, video, social media, online media, etc.

\_\_\_\_\_ I hereby release and hold harmless YLF staff and volunteers, its members, agents, employees or volunteers, for any accident, injury, illness or any damage related to the above-mentioned student's attendance at, or participation in, any activity or session of the program.

Signature of Parent or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

\*Please complete and sign medical information form on reverse as well\*

## SCHOOL APPROVAL OF GRADES AND CHARACTER

All applicants must have verification of their 2.0 unweighted cumulative grade point average and approval from a school official that the student has demonstrated a high standard of character and behavior. The school official must also acknowledge that the student will attend all program sessions of Youth Leadership Flagler. Please have your school official (principal, dean or guidance counselor) sign below. The Flagler County School District will allow excused absences from all activities for the program days that fall on school days.

I APPROVE OF THE PARTICIPATION OF \_\_\_\_\_ IN THE YOUTH LEADERSHIP FLAGLER PROGRAM BASED ON THE ABOVE CRITERIA. SCHOOL ATTENDANCE CREDIT WILL BE GRANTED FOR EACH SCHOOL DAY SESSION ATTENDED.

Signature of School Official \_\_\_\_\_

Title \_\_\_\_\_ School Name \_\_\_\_\_ Date \_\_\_\_\_

Applications will be reviewed in confidence. The deadline for applying is March 14, 2014.

# YOUTH LEADERSHIP APPLICATION FORM

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## MEDICAL INFORMATION

We do not anticipate ever having a Youth Leadership Flagler student injured on a program day to the point of needing medical attention. However, in case of an emergency, we would like the following information to provide your child with the best and quickest medical care.

Name of Student \_\_\_\_\_

School \_\_\_\_\_

Emergency Contact Information #1 \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Cell \_\_\_\_\_ Home \_\_\_\_\_ Work Phone \_\_\_\_\_

Emergency Contact Information #2 \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Cell \_\_\_\_\_ Home \_\_\_\_\_ Work Phone \_\_\_\_\_

Medical Insurance Company \_\_\_\_\_

Group Number \_\_\_\_\_ Policy holder name \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Cell \_\_\_\_\_ Home \_\_\_\_\_ Work Phone \_\_\_\_\_

Member Number \_\_\_\_\_

Allergies to Medication \_\_\_\_\_

Allergies Otherwise \_\_\_\_\_

Medical conditions, physical limitations or diet restrictions (including vegetarian, vegan, or other preferences) of which we should be aware: \_\_\_\_\_

My signature indicates that the information above is true to the best of my knowledge. I give permission for Youth Leadership Flagler staff and volunteers to obtain emergency medical treatment for my child, if needed, knowing they will do everything in their control to reach me immediately before any medical treatment takes place. Should they not be able to reach me and should delay in treatment be detrimental to my child's health, my signature gives permission for them to move forward with medical treatment to keep my child in stable condition until a parent/legal guardian is contacted.

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Printed Name of Parent/Legal Guardian \_\_\_\_\_

# REFERENCE FORM

High School \_\_\_\_\_

## MISSION STATEMENT

To develop a corps of informed, committed, and qualified young people capable of providing dynamic leadership in their schools, careers and communities as they mature into adulthood.

*Youth Leadership Flagler is a program of the Flagler County Chamber of Commerce*

## PLEASE TYPE OR PRINT WITH BLACK INK

### Applicant:

Student's Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_

### Reference:

The person named above is an applicant for the Youth Leadership Flagler program. The selection committee attaches considerable weight to the statements made by the applicant's references. The committee is aware of the time necessary to prepare such an assessment and gratefully acknowledges your help.

Name of Reference \_\_\_\_\_ Position/Title \_\_\_\_\_

School/Firm/Organization \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_

1. For how long and in what capacity have you known the applicant? \_\_\_\_\_

\_\_\_\_\_

2. What do you consider the applicant's primary talents or strengths as they relate to our mission statement? \_\_\_\_\_

\_\_\_\_\_

3. Participation in Youth Leadership Flagler requires dependability, personal initiative, and team work. What unique qualities would suggest that this applicant would be a positive asset to the class? \_\_\_\_\_

\_\_\_\_\_

4. How has the applicant shown an interest in community affairs and a concern for others? \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE RETURN THIS FORM TO THE CHAMBER OF COMMERCE BY MARCH 14, 2014  
YLF, Flagler County Chamber of Commerce and Affiliates, 20 Airport Rd, Suite C, Palm Coast, FL, 32164