

APPLICATION FORM - A

KANSAS YOUTH LEADERSHIP SUMMIT

August 1-3, 2010
Rock Springs 4-H Center
Junction City, KS

For teams to be considered to attend the Kansas Youth Leadership Summit, please complete this application form - A, both front and back, and return by April 23, 2010. Teams selected to participate at the Summit will be sent Application Form - B, which is a roster for names of all the team members who will attend; Form - B must be completed and returned to Kansas Family Partnership by June 25, 2010. Teams must consist of 6-8 students who are incoming FRESHMEN, SOPHOMORES AND JUNIORS (**NO SENIORS**) and two adult sponsors such as a community volunteer, coalition member, or a Regional Prevention Center staff. A selection committee will evaluate Team applications based on their ability to demonstrate community/school collaboration and on the responses to the questions found on the other side of this form.



Please complete the form below, respond to the questions on the reverse side and return to:
Kansas Family Partnership
c/o Maria Torrez Anderson
5942 SW 29th Street, Ste. D
Topeka, KS 66614

As space is limited to 240 individuals and considerable resources are expended to underwrite the costs associated with each team, those who are accepted must agree to the following conditions:

- I agree to assemble and bring a team of 6-8 total members including two adults per team and freshmen, sophomore and/or junior-age high school youth.
(High school seniors will not be accepted)
- I anticipate building a team of ____ members. (# of team members attending)
- I agree to submit a final list of team members by June 25, 2010. Our team will attend and actively participate in the required workshops and team sessions during the Summit.
- During the Summit, our team will develop an action oriented problem solving plan to reduce underage drinking in our community.
- I will submit a progress report on how our plan is being implemented in our community by February 18, 2011.
- Our youth participants will complete and return a post summit evaluation by February 18, 2011.

I have carefully read and agree to the conditions listed above.

Signed
Team Leader: _____ Printed Name
2nd Adult: _____ School/Agency: _____ Date
School/Agency Address: _____
City: _____ County: _____ Zip: _____
School/Agency Phone: _____ Home Phone: _____
Fax: _____ Work e-mail: _____
Home Address: _____ City: _____ Zip: _____
Home e-mail: _____

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1. Why do you feel your team should be selected to attend the 2010 Kansas Youth Leadership Summit?

2. If your team is selected to participate at the Summit, what are your expectations and what do you hope to learn from this event?

3. If your team is selected, what are some of the steps they would take to assist in reducing underage drinking and encouraging the use of safety belts in their school or community?

4. If your team is selected, what groups/organizations will you collaborate with once the team returns home and what do you hope to accomplish as a result of your participation at the Summit?

5. How do you plan on keeping your team involved and succeeding with their action-oriented problem solving plans once they leave the Summit?
