

**Granville County 4-H
Teen Leadership Program**
Open to youth **ages 14-18**

Role of the Teen Leaders:

The purpose of the program is to promote skills related to employment preparedness, leadership, and personal responsibility. Teen leaders will participate in training before serving in leadership roles in our summer day camp program. Teen leaders are asked to participate in at least three (3) days of the Summer Fun Program.

Required commitment:

- Attend one of the required Teen Leadership Trainings: **June 1st** 8:30am-11:30am, OR **June 14th** from 12:00pm-3:00pm
- Provide at least three (3) days of service/leadership in the Granville County 4-H Summer Program
- Behavior at the day camps must be professional and beyond reproach. Teens must follow the 4-H Code of Conduct. Violations will be dealt with by the appropriate action designated in the 4-H Code of Conduct and may result in immediate removal from the program.

Selection Process:

Any teens wishing to participate in the program should complete this application and return it to the address below. All applications must be received by **May 24th, 2019**. Please be aware that we will contact your references to help determine the best candidates for this program. Candidates will be notified to the status of their application by **May 31st**. Training on **June 1st** OR **June 14th** is mandatory. If neither day works for you, please contact Emily (edrober2@ncsu.edu or 919-603-1350). Please note that candidates who lack the maturity to serve as a role model for children may be rejected.

Please circle all of the dates you know you are able to attend this program.

(This does not mean you will have to work all of these days, but knowing your availability will help me create a schedule for all teen leaders.)

JUNE	JULY	AUGUST
13 th 25 th 26 th 27 th	2 nd 3 rd 16 th 17 th 18 th 25 th 26 th 29 th 30 th 31 st	1 st 2 nd



Name of Applicant

Name: _____
 First Middle Last

Address: _____
 Street City State Zip

Phone: () _____ -- _____ Email: _____

Date of Birth: _____/_____/_____ Are you 14 or older? Yes No

Parent Name: _____ Parent Phone:() _____--_____

Have you ever been convicted of a crime? Yes No
If yes, please give details: _____

Are you currently a 4-H member? Yes No If yes, name of club

Do you have transportation? Yes No
Please explain how you will travel to and from the Granville County Extension Center for the program. _____

School Name: _____ Grade in Fall 2019: _____

Please explain your experience in working with youth. If you have no experience, please explain why you would like to work with youth.



Name of Applicant

Why do you want to participate in the Teen Leadership Program? _____

What skills and talents do you have that you think will help you be successful this summer?

What do you hope to gain from the Teen Leadership Program this summer?

What are the main qualities of a leader? How do you exemplify those qualities? List examples. _____

What school, community, and/or other extracurricular activities have you been involved in which reflect your character and relate to your Teen Leadership Program placement?

Please tell us a little about your goals for the future (ex. Do you plan to continue your education beyond high school? Do you have interest in a particular career?):

If you need additional space, you may write on a separate sheet.



Teen Leadership Application 2019



Name of Applicant

Please identify three people who we can contact who know you well (please exclude family).

Tip: A good reference is from someone who knows you well and will be able to speak their best knowledge of you. This could be your principal, counselor, a teacher, coach, club leader, or other adult community leaders.

Name	Phone	Years Known
_____	() _____ -- _____	_____
Organization & Job title _____		

Name	Phone	Years Known
_____	() _____ -- _____	_____
Organization & Job title _____		

Name	Phone	Years Known
_____	() _____ -- _____	_____
Organization & Job title _____		

North Carolina State University and North Carolina A&T State University commit themselves to positive action to secure equal opportunity regardless of race, color, creed, national origin, religion, sex, age, veteran status, or disability. In addition, the two Universities welcome all persons without regard to sexual orientation. North Carolina State University, North Carolina A&T State University, U.S. Department of Agriculture, and local governments cooperating.



Teen Leadership Application 2019



Name of Applicant

Participant Agreement:

I certify that all information provided is correct. I have read through and understand the Teen Leadership Program requirements. If selected, I will meet and abide by the requirements set forth.

Applicant Signature

Date

Parental Permission Form:

Parent/Guardian:

Your child expressed an interest in the Teen Leadership Program. By applying for this program, your child is making a commitment to take part in an exciting program being offered by Granville County 4-H. This form is to verify that you are aware of your child's interest and understanding of the NC 4-H Code of Conduct and Disciplinary Procedures, program requirements, and dates. Upon the selection to participate, the Teen Leaders are expected to attend all programs and activities assigned unless there is a valid reason such as illness, doctor visit, school activity, death in the family. Please make sure your child has chosen at least dates that do not conflict with your schedule already planned for the summer. Your child will need reliable transportation for this program. We are not responsible for your child's transportation to and from Granville County Extension Center. You are responsible for reading this information in full before signing this form. Applications will be reviewed in confidence and applicants will be notified in writing of the selection decision. At the training on **June 1st** or **June 14th**, if selected and not already a member of 4-H, your child will be expected to fill out the 4-H Enrollment Form and Medical Release form in addition to the application.

I have read and understand the Teen Leadership Program requirements. My son/daughter has my support and permission to participate in the 2019 Teen Leadership Program.

Parent Signature

Date

Return to:
Emily Roberts Vickery
125 Oxford Outer Loop Rd
Oxford, NC 27565
919-603-1350
edrober2@ncsu.edu



Teen Leadership Application 2019

