

# YOUTH LEADERSHIP UPSON

P.O. BOX 827  
110 WEST MAIN STREET  
THOMASTON, GEORGIA 30286

2019-2020 APPLICATION

**\*Applications must be HANDWRITTEN by the applicant\***

**\*May we suggest you make a copy of this application before you begin writing?**

**\*Please note if you are selected for the program and are dual enrolled, that it will be your responsibility to let your professors know about any days you may miss due to the program.**

## I. BASIC INFORMATION

Name \_\_\_\_\_  
Last First Name Called

Home and Mailing Address \_\_\_\_\_  
Street and Number

\_\_\_\_\_ Date of Birth \_\_\_\_\_  
City / State Zip Code

Home Phone \_\_\_\_\_ E-mail Address (mandatory) \_\_\_\_\_

Applicant's or Parent's Cell Number (mandatory) \_\_\_\_\_

Name of School you attend \_\_\_\_\_ School Grade \_\_\_\_\_

Name of Parent(s) or Guardian \_\_\_\_\_

Are you employed? If so, where: \_\_\_\_\_

Do you play sports or participate in any after school activities? If so, what: \_\_\_\_\_

List any clubs & organizations of which you are affiliated: \_\_\_\_\_

Special awards and/or honors received: \_\_\_\_\_

What are you currently doing that demonstrates your leadership abilities; whether at your school, your community, or your church? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your greatest strength and what is your greatest weakness and please explain? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you feel is the most significant challenge facing the community in which you live? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please offer suggestions or a solution as to how to tackle the challenge you presented above? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is one of the most notable opportunities that Upson County has to offer? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What knowledge do you hope to gain from your participation in Youth Leadership Upson? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## II. COMMITMENT

Participation requires attendance at all regularly scheduled monthly Youth Leadership Upson meetings/activities as described in this year's brochure.

Will your work or other commitments compete with your ability to participate in monthly activities?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain what adjustments you expect to make: \_\_\_\_\_

Participants for the Youth Leadership Upson program must have the support of their employer. The signature of the supervisor is necessary as an indication of support.

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Title

Participants for the Youth Leadership Upson program must have the support of their coach. The signature of the coach is necessary as an indication of support.

\_\_\_\_\_  
Signature of Coach/Sponsor

### APPLICANT COMMITMENT

I understand the purpose of the Youth Leadership Upson program. If I am selected, I will commit the necessary time and resources to complete the program. Even though emergencies do arise, if I miss more than one session or trip, I understand that I may be asked to withdraw from the program. If selected, I understand that I will be asked to sign a code of conduct committing myself to this organization and the behavior and rules it stands for. In signing this application, I understand and accept these commitments and agree to honor them. I am aware that any information that I place on this application is subject to review and if any information is incorrectly or dishonestly placed on this application, I will be asked to withdraw from the program.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Return to: Youth Leadership Upson Committee  
Thomaston-Upson Chamber of Commerce  
P.O. Box 827  
Thomaston, GA 30286

**Your Application and two recommendation forms must be received by 4:00 pm on  
Monday, September 9, 2019**

Youth Leadership Upson is a program of the Thomaston-Upson Chamber of Commerce and is sponsored by Upson EMC.

Applicants must complete an application form and have references in order to be considered for the program. Please feel free to write on the back of the this application or add additional paper if you need more space.