



## Leadership Sedalia 2018-2019 - Youth Confidential Application

- Legibly complete every section of this application. This is a Word document and can be completed by typing in the fill-in boxes.
- An electronic version is available at [www.sedaliachamber.com](http://www.sedaliachamber.com). Responses should be limited to the space provided.
- Send completed application by **March 16 by 4:00 pm** to: Leadership Sedalia Steering Committee, c/o Sedalia Area Chamber of Commerce, 600 E. Third (Katy Depot), Sedalia, MO 65301.

### PERSONAL DATA

Name (last)	(first)	(middle)
Name you prefer to be called:		
Date of Birth:	Sex M <input type="checkbox"/> F <input type="checkbox"/>	
Street Address:	City:	State:      Zip:
Home Phone:	Student Cell Number:	
Student Email:	Parent Email:	
Parent(s) or Guardian Name:		
Parent(s) or Guardian Address:		
Parent(s) or Guardian Daytime Phone:		

### SCHOOL INFORMATION

School:	Grade in 2018-19 11th <input type="checkbox"/> 12th <input type="checkbox"/>
Address:	GPA (2.5 or higher)
State:      Zip:	School FAX:
School Guidance Counselor:	School Principal:

### SCHOOL/COMMUNITY ACTIVITIES

**Attach a typewritten list following the format of the form on page 4.** List your honors/awards, organizations, and volunteer activities. Indicate your leadership role(s), if any.

### ESSAY

**Attach a typewritten essay.** Give examples of how you have demonstrated individual leadership and what you will contribute to this program. This is your opportunity to sell yourself. The essay is very important in the selection process. (300 words or less)

### REFERENCES

**Provide two references by having individuals complete the reference forms on pages 5 and 6.** References should be from someone who knows you at your school (faculty member); and one from someone, other than a parent or guardian, who knows you outside of school.

*Those completing the reference form should give it to you in a sealed envelope or send it to Leadership Sedalia Steering Committee, c/o Sedalia Area Chamber of Commerce, 600 East Third, Sedalia, MO 65301.*

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## CRITERIA FOR SELECTION

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Class members must be high school juniors *or* seniors, attend high school in the Sedalia 200 School District, Sacred Heart High School, or Applewood School, or Home-Schooled within the Sedalia #200 School District and have the following:

- High standards of personal quality and integrity
  - Sincere willingness to serve the community
  - Participation in school and/or community activities
  - 2.5 or higher GPA
  - Parental permission and support
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## PROGRAM REQUIREMENTS

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- Send a completed application to the Chamber by March 16, by 4:00 p.m.
  - Attend an orientation for parents and students on Sunday, April 22, 2018 1:00-4:00 p.m.
  - Participate in a class project (requires time outside of class) in conjunction with other class members.
  - Attend Leadership Sedalia graduation on Thursday, April 11, 2019.
  - Wear business or business casual attire to Leadership Graduation.
  - Provide transportation—Students are responsible for their own transportation. Meetings will be held at a variety of sites throughout the City. Locations will be included in the class agenda.
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## ATTENDANCE

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- Students are expected to be on time for each class session and class project team meetings.
  - Students may not miss more than two class meetings and, or class project meeting.
  - Absences due to extenuating circumstances may be excused, but no more than once in the program year.
  - Absences will be communicated to the school principals/counselors as they occur.
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<b>FUNDING</b>
<ul style="list-style-type: none"><li>• The participation fee is <b>\$100</b> per student and must accompany the completed application.</li><li>• Please make check payable to the <u>Sedalia Area Chamber of Commerce</u>.</li><li>• If you are not accepted, your check will be returned to you.</li></ul>

**PARENTAL PERMISSION**

Dear Parent/Legal Guardian:

By participating in the Leadership Sedalia - Youth, your son/daughter is making a commitment to take part in an outstanding leadership development program. This form is to verify that you are aware of the program requirements and that students are expected to attend all program activities.

I have read and understand the program requirements, including the attendance policy.  
\_\_\_\_\_ (applicant's name) has my support and permission to participate in the Leadership Sedalia - Youth.

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

\_\_\_\_\_  
**Date**

*This certifies that I have read and understand the program requirements, class project, and commitment to the class.*

**PROGRAM PARTICIPATION AGREEMENT**

I permit Leadership Sedalia - Youth to print photographs and biographical information about me/applicant in material promoting the programs and accomplishments of its graduates.

Yes  No

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

*This verifies that the applicant understands the attendance requirements, project, and commitment to the class.*

\_\_\_\_\_  
**Signature of Parent or Guardian**

\_\_\_\_\_  
**Date**

**PROGRAM PARTICIPATION AGREEMENT - SCHOOL**

\_\_\_\_\_  
**Signature of Principal/Parent if Home-Schooled**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Guidance Counselor**

\_\_\_\_\_  
**Date**

Send completed application by March 16, 2018 by 4:00 p.m. to: Leadership Sedalia Steering Committee, c/o Sedalia Area Chamber of Commerce, 600 E. Third (Katy Depot), Sedalia, MO 65301.

List your involvement in the following, especially your leadership roles. (i.e. class president)

**HONORS/AWARDS** (Rotary Student of the Month)

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**SCHOOL ORGANIZATIONS** (Student Council, clubs, sports)

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**COMMUNITY/CHURCH ORGANIZATIONS** (Scouts, 4-H) (youth group, bell choir)

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**VOLUNTEER ACTIVITIES** (Camp Blue Sky, Salvation Army Bell Ringer)

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# LEADERSHIP SEDALIA

## Teacher/Education Leader Reference Form Youth Application 2018-19

\_\_\_\_\_  
Name of Youth Applicant

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

Each youth who applies to Leadership Sedalia must provide two references using this form.

- Complete the information below and rank each of the characteristics indicated.
- This is a Word document and can be completed by typing in the fill-in boxes. An electronic version is available at [www.sedaliachamber.com](http://www.sedaliachamber.com)
- Send completed form to the Chamber at the address below or give to the student in a sealed envelope.  
Leadership Sedalia Steering Committee, Sedalia Area Chamber of Commerce  
600 East Third, Sedalia, MO 65301

Teacher/ \*If Home-Schooled recommendation must be from a Community Leader. (Scout Leader/Church Leader)  
– I know the applicant at the school that he/she attends.  
List the class(es) or activit(ies) in which you had the applicant.  
\_\_\_\_\_

Characteristic	Not Applicable or Unknown	1	2	3	4	Score
		Below Average	Average	Superior	Exceptional	
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Quality of Individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Quality of Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Moral/ethical behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Respectful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Awards/Honors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
School/Community Organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Volunteer Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>TOTAL</b>						

Comments: \_\_\_\_\_

\_\_\_\_\_  
Signature of Teacher/Community Leader

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

**LEADERSHIP SEDALIA**

\_\_\_\_\_  
Name of Youth Applicant

**Individual/Community Leader Recommendation Form**  
Youth Application 2018-19

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

Each youth who applies to Leadership Sedalia must provide two references using this form.

- Complete the information below and rank each of the characteristics indicated.
- This is a Word document and can be completed by typing in the fill-in boxes. An electronic version is available at [www.sedaliachamber.com](http://www.sedaliachamber.com)
- Send completed form to the Chamber at the address below or give to the student in a sealed envelope.  
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600 East Third, Sedalia, MO 65301

Individual/Community Leader – I know the applicant outside of their school and I am not their parent or guardian. Indicate how you know the applicant.

\_\_\_\_\_

Characteristic	Not Applicable or Unknown	1	2	3	4	Score
		Below Average	Average	Superior	Exceptional	
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Quality of Individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Quality of Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Moral/ethical behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Respectful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Awards/Honors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
School/Community Organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Volunteer Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>TOTAL</b>						

Comments: \_\_\_\_\_

\_\_\_\_\_  
Signature of Individual/Community Leader

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date