



# YOUTH LEADERSHIP KEARNEY APPLICATION

Revised March 30, 2008

## ELIGIBILITY REQUIREMENTS

- Enrollment as a student in the Kearney School District or home schooled in the Kearney area.
- Applications must be submitted during the spring of sophomore year for participation as juniors.
- Students selected must commit to full participation in the program.
- Participants must have a desire to develop and utilize leadership skills.

## INSTRUCTIONS

- Applications **must be typed** and submitted in hard copy (no electronic applications). Application forms are available from the Kearney Chamber of Commerce or online at [www.kearneycoc.org](http://www.kearneycoc.org).
- Complete the application with all the necessary signatures. Incomplete or late applications will not be considered.
- Completed application and all letters of reference are due by **June 1st at 5:00 p.m.**
- For further information, contact the Kearney Chamber of Commerce office at (308) 237-3101.

### Submit applications to:

Kearney Chamber of Commerce  
Attention: Leadership Kearney  
1007 2<sup>nd</sup> Ave  
P.O. Box 607  
Kearney, NE 68848

## SELECTION PROCESS

- The Leadership Kearney Board of Directors Selection Committee will review applications **in confidence**. All applicants will be notified in writing no later than July 1st as to their acceptance to the program. **Personal information that might identify the candidates is not revealed to the committee members.**

## GRADUATION REQUIREMENTS

- Attendance is required at all sessions and the opening retreat. The sessions will be held during the day on the second Wednesday of each month until approximately 3:30 p.m. and should not interfere with after school activities, with the exception of the State Government Day. Every effort will be made to avoid conflicts with the other school functions. Your teachers and coaches are aware of this program and your absence from school during these sessions will be allowed. One excused absence from the program may be allowed under certain pre-arranged circumstances. Participation is a privilege, so attendance is your responsibility.
- Participation in a Youth Leadership Kearney community project.

## PROGRAM FUNDING

- Participation in Youth Leadership Kearney has no cost to the individual participants. Full scholarships will be arranged for every student with area businesses and service clubs. Selected youth are responsible for reporting their progress in the program to their sponsor throughout the year.

## PERSONAL DATA

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
Parent/Guardian Name(s)

\_\_\_\_\_  
School

**(The rest of the page is intentionally left blank, as it is a blind selection process and this page will not appear as part of the application during selection process. The provided information will be used for contacting the applicant after the selections have occurred.)**

## VISION

Youth Leadership Kearney is designed to assist participants in developing leadership skills and in expanding their awareness of the social, economic, and political challenges facing the Kearney community. The Leadership Kearney Board believes that each participant has the potential to become a leader and valuable decision-maker in the future.

1. Please explain what you hope to gain by participating in Youth Leadership Kearney.

---

---

---

---

2. How do you believe citizens can contribute to the betterment of their communities?

---

---

---

---

3. What do you think are the three most significant challenges facing the Kearney area? Please be specific and for each challenge suggest a solution.

---

---

---

---

---

---

---

---

---

---



## WORK EXPERIENCE

Do you currently have a job \_\_\_ Yes \_\_\_ No

If not, please explain \_\_\_\_\_

List any past or present paid job experience including dates employed and duties, start with your most recent.

Employer:

Job:

Dates:

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

## AWARDS AND HONORS

List awards, honors, or recognition for academic, school, or community related activities received from the 7<sup>th</sup> through 10<sup>th</sup> grades.

|       |
|-------|
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |

## ORGANIZATIONS AND ACTIVITIES

Please list, **in order of importance to you**, any school, religious, social, athletic, hobbies or other activities or organizations in which you have participated in from 7<sup>th</sup> through 10<sup>th</sup> grade.

Organization/Activity:

Grade(s):

Leadership Responsibility/Involvement:

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

## REFERENCES

Two letters of reference are **required**. Please include your sealed letters of reference with your application. References are recommended from someone who knows you well, other than a parent or relative. Your high school principal, counselor, teacher, coach, scout leader, church leader, etc. often make good references.

If you have questions, please contact Shana Thomas of the Kearney Area Chamber of Commerce at 237-3101 or via email at [sthas@kearneycoc.org](mailto:sthas@kearneycoc.org).

## APPLICANT COMMITMENT

**“I understand the purposes of the Youth Leadership Kearney program. If I am selected, I will devote my time and resources to complete the program. My attendance is expected at all sessions and the opening retreat. If I miss more than one session, I understand that I may be asked to withdraw from the program. The class will be required to participate in a community project. In signing this application, I understand and accept these commitments and agree to honor them.**

**Furthermore, I understand that my conduct at all times represents the Leadership Kearney Program. As a role model, I pledge to make positive decisions that would be expected from an up and coming leader on my campus and in my community. I understand that inappropriate or illegal conduct outside of Leadership Kearney activities may lead to my dismissal from the program.”**

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Preferred Phone Number

\_\_\_\_\_  
Parent/Guardian Email Address

## PRINCIPAL'S AGREEMENT

Applicant's GPA (Grade Point Average) is \_\_\_\_\_ on a \_\_\_\_\_ point scale. “I support this student's application to Youth Leadership Kearney and understand that the student will participate in a one-day session each month, August through April and the student will not be in class those days.”

\_\_\_\_\_  
Signature of administrator

\_\_\_\_\_  
Date