

Rockdale Youth Leadership 2015-2016

Thank you for your interest in the Rockdale Youth Leadership Program. You can be nominated by a student, parent, teacher, counselor, administrator, or by yourself to participate in this year's program.

Students must complete the application and have the reference forms completed by a counselor and a coach, teacher, or administrator at their school.

Rockdale Youth Leadership (RYL) provides leadership development and community awareness training for 10th grade students in Rockdale County. Through collaboration with the Conyers-Rockdale Chamber of Commerce and Rockdale County Public Schools, aspiring youth leaders will have the opportunity to interact with local decision makers and participate in community service activities. During the program, students will interact with community leaders, local elected officials, and school administrators to enhance their awareness of community needs and resources. Through interactive workshops, special tours, and community service projects, RYL participants will develop the knowledge and skills necessary to become confident, caring leaders in their community and respective schools. To be nominated for participation in RYL, students must have met the following criteria:

- Demonstrate leadership potential. (school/community)
- Minimum 2.5 GPA.
- Student in good standing with clear attendance and behavior records.
- Willing to participate in community service activities.
- Willing to participate in all sessions after school including some Saturdays.
- Willing to pursue a school leadership role following participation in the program.

The RYL program is held from September 2015 through May 2016. Please review the entire RYL application packet to understand all of the requirements. The RYL Class of 2016 will kick-off on Thursday, September 24, with an orientation session. Please see the calendar inside for details. (*Dates subject to change.*) **Parents should attend the orientation session.**

The RYL application deadline is Wednesday, September 9.

Applications may be submitted electronically or as a hard copy.

- **Hard copy:** To submit a hard copy of the application, complete the form and return it to Tami Maddox, RCPS Work-Based Learning & Youth Apprenticeship Coordinator, Rockdale Career Academy, 1064 Culpepper Drive, Conyers, GA 30094.
- **Electronic copy:** To submit an electronic copy of the application, complete the form, save it with your name in the file name, and e-mail it to Tami Maddox at tmaddox@rockdale.k12.ga.us.

Be sure that teacher and counselor references are sent in a timely manner, so the person making the reference can complete and return the form by the deadline.

If you have any questions or concerns, please contact:

*Tami Maddox, RCPS Work-Based Learning & Youth Apprenticeship Coordinator
770-388-5677 x 31303 or tmaddox@rockdale.k12.ga.us*

Rockdale Youth Leadership 2015-2016 Application TYPE or PRINT NEATLY

Personal Information

Applicant's Name:

Name you prefer to be called:

Home Address: Apt #:

City: State: Zip:

Home phone: Cell phone:

Your e-mail:

Your age: Race: Gender:

Your high school:

Your career pathway:

Hobbies/leisure time activities:

Plans following your high school graduation:

Select Your Shirt Size: (Men's/Women's shirt):

X-Small Small Medium Large XL 2XL

Parent/Guardian Name:

Parent/Guardian E-mail:

Parent/Guardian Cell Number:



School and Community Involvement

Please list in **ORDER OF IMPORTANCE TO YOU** (up to six) any school, club, sports, civic, religious, social, employment, or other activities in which you are a participant. Include only those activities in which you have been involved since 9th grade.

Organization	Position Held	Date of Involvement
1.		
2.		
3.		
4.		
5.		
6.		

Briefly state any contributions/achievement in one of these organizations that you consider significant. Explain your role in this accomplishment.

Have you been as active in school and community activities as you would like to be?
Yes No If "No," what has been the major barrier to greater participation?

Leadership Assessment

Please answer the following three questions in the space provided.
Use additional paper if necessary.

1. What is a critical issue facing your high school? Please include in your response how this issue affects your education and how you see youth playing a role in addressing this issue.

2. What is your personal definition of leadership? Describe a particular issue or situation in which you have demonstrated your leadership skills.

3. What do you expect to gain from participation in Rockdale Youth Leadership?



Rockdale Youth Leadership 2015-2016

Teacher, Advisor, Leader, Coach - Reference Form

TYPE OR PRINT NEATLY

STUDENT NAME: _____ **School:** _____

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How long have you known this student?

RATINGS					
Please rank this student in comparison to the general population at your school.					
	Needs Improvement	Fair	Average	Excellent	Outstanding
Maturity/Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Attendance/Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Problem Solving Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Interpersonal Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Personal Values/Ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Would you recommend this student for the RYL program?					

ANY QUALITIES ABOUT THIS STUDENT YOU WISH TO SHARE:

Teacher, Advisor, Leader, Coach Name: _____

School/Organization: _____

E-mail Address: _____

Contact Number and best time to reach if needed: _____

Return Completed Referral Form by Wednesday, September 9, 2015, to Tami Maddox, Rockdale Career Academy, 1064 Culpepper Drive, Conyers, GA 30094 770-388-5677 x 31303 (office), tmaddox@rockdale.k12.ga.us



Rockdale Youth Leadership 2015-2016

Counselor - Reference Form

TYPE OR PRINT NEATLY

STUDENT NAME: _____ **School:** _____

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How long have you known this student? _____

Is this student on track for graduation? _____

Current GPA: _____

RATINGS					
Please rank this student in comparison to the general population at your school.					
	Needs Improvement	Fair	Average	Excellent	Outstanding
Maturity/Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Discipline Record	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Attendance/Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Communication/Listening Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comments</i>					
Would you recommend this student for the RYL program?					

ANY QUALITIES ABOUT THIS STUDENT YOU WISH TO SHARE:

Counselor Name: _____ *School:* _____

E-mail Address: _____ *Contact Number and best time to reach if needed:* _____

Return Completed Referral Form by Wednesday, September 9, 2015, to Tami Maddox, Rockdale Career Academy, 1064 Culpepper Drive, Conyers, GA 30094 770-388-5677 x 31303 (office), tmaddox@rockdale.k12.ga.us

Rockdale County Public Schools does not discriminate based on race, color, national origin, sex, age, religion, disability, or protected activities in educational programs or activities or in employment matters. For additional information, please call 770-483-4713 or visit <http://www.rockdale.k12.ga.us>.

Rockdale Youth Leadership 2015-2016

Tentative Schedule*

Date	Day	Activity	Time	Possible Points
September 9	Tuesday	Applications Due	5 p.m.	-
September 21	Monday	Announce RYL class	N/A	-
September 24	Thursday	Orientation – RCA	6 p.m. – 7:30 p.m.	2
October 1	Thursday	Leadership Retreat - Winning Strides	5 p.m. – 8 p.m.	3
October 22	Thursday	Protecting Our Community	5 p.m. – 8:30 p.m.	3
November 5	Thursday	Working in Our Community	9:30 a.m. – 2:30 p.m.	5
November 7	Saturday	Teen Leadership Summit at RCA	8 a.m. - 12 noon	5
December 3	Thursday	Culture in Our Community	5 p.m. – 7 p.m.	2
January 14	Thursday	Caring in Our Community	5 p.m. – 8 p.m.	3
February 25	Thursday	Leading in Our Community	2 p.m. – 5 p.m.	3
March 1	Tuesday	Dinner and Etiquette Day	5 p.m. – 7 p.m.	2
March 14	Monday	Educating Our Community	2 p.m. – 5 p.m.	3
April 16	Saturday	Giving Back to Our Community	8 a.m. - 12 noon	4
May 2	Monday	Graduation	6:30 p.m. - 8:30 p.m.	2

Total Possible Points **37**

Points needed for Graduation **31**

Make up Meetings:

- Board of Education Meeting, County Commission Meeting, or WBL Seminar: **1 point each**
- MLK Breakfast (January 18 at Longhorn's Steakhouse): **1 point**
- No Place for Hate Summit (January 18 in Atlanta): **3 points**

****Dates/times subject to change. Complete schedule will be provide at Orientation.***

Applicant and Parent/Guardian Commitment

To graduate from Rockdale Youth Leadership, a student is expected to earn at least 31 points by attending RYL sessions or attending make up sessions. Students and parents will be informed of make-up opportunities throughout the RYL 2015-2016 program. Participating in the community service day with Hands Across Rockdale in April 2016 is also a requirement to graduate. I understand the purpose of Rockdale Youth Leadership (RYL). If selected, I will commit my time and resources to complete the program. Even though emergencies may arise, I understand that if I miss three sessions, I may be asked to withdraw from the program. In signing this application, both my parent/guardian and I understand and accept this commitment and honor it.

Upon acceptance into RYL, a \$75 commitment fee is requested to be paid at the Orientation Program on Thursday, September 24. Partial and full scholarships are available based on need. RYL will not turn away any accepted student based on ability to pay.

1. Applicant Signature _____ Date _____

2. Parent/Guardian Signature _____ Date _____

(If submitting application electronically, application can be signed at Orientation.)



Rockdale Youth Leadership 2015-2016

Parental Consent and Medical Release Form

Students Name: Age: Date of Birth:

Gender: Home Phone:

Address:

City, State, Zip:

School:

Parent / Guardian Names:

Parent / Guardian Home Phone:

Parent / Guardian Work Phone:

Emergency Contact: *(Please list two adults other than parents who may be contacted in case of emergency.)*

Name: Phone(s):

Name: Phone(s):

Medical Information

Name of Physician: Phone:

Date of Last Physical Examination: Drug Allergies:

Other Allergies:

Describe any physical limitations:

Describe any recent illness or injury:

Is there a history of:

- | | | |
|------------------|------------------------------|-----------------------------|
| Heart condition | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Diabetes | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Asthma | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Epilepsy | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Rheumatic fever | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Other (list any) | | |



Rockdale Youth Leadership 2015-2016 Parent Consent and Medical Release Form (cont.)

To Whom It May Concern:

The undersigned do (does) hereby give permission for our (my) child, _____ to attend and participate in activities sponsored by Rockdale Youth Leadership for the 2015-2016 year.

We (I) authorize an adult, in whose care the minor has been entrusted by Rockdale Youth Leadership, to consent, in case of emergency, to any X-Ray examination, anesthetic, medical, surgical, or dental diagnosis or treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any duly licensed physician or dentist, whether such diagnosis or treatment is rendered at the office of said physician or dentist or at a licensed hospital.

The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization.

Hospital Insurance: Yes No

Insurance Company:

Policy No:

The undersigned do (does) also hereby give permission for our (my) child to ride any vehicle designated by the adult whose care the minor has been entrusted while attending and participating in activities sponsored by Rockdale Youth Leadership.

(If submitting application electronically, application can be signed at Orientation.)

Participant *Date*

Father (or Guardian) *Date*

Mother (or Guardian) *Date*

Before returning application:

- Complete all sections of the application.
- Review the calendar and session schedule to meet attendance requirement.
- Answer each short-answer question.
- Have the Reference form completed by a ***Teacher, Advisor, Leader or Coach.***
- Have the Counselor Reference form completed by a ***Counselor.***
- Complete the Parental Consent and Medical Release Forms.
- Review and include all signatures
- Submit your application by September 9, 2015.

For more information, please contact your RYL School Contact:

- Robert St. John – Heritage High School**
- Lauren Kurtz – Rockdale Magnet School**
- Myra Williams – Rockdale County High School**
- Tami Maddox – Rockdale Career Academy**
- Cecile Cooper – Salem High School**

Application Submission

The RYL application deadline is Tuesday, September 9, 2015.

Applications may be submitted electronically OR as a hard copy.

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- **Hard copy:** To submit a hard copy of the application, complete the form and return it to: Tami Maddox, RCPS Work-Based Learning & Youth Apprenticeship Coordinator, Rockdale Career Academy, 1064 Culpepper Drive, Conyers, GA 30094.

Be sure that the teacher reference is sent in a timely manner so the person making the reference can complete and return the form by the deadline.

Questions may be directed to:

Tami Maddox, RCPS Work-Based Learning & Youth Apprenticeship Coordinator
Rockdale Career Academy, 1064 Culpepper Drive, Conyers, GA 30094
770-388-5677 x 31303 (office)
tmattox@rockdale.k12.ga.us