



Class of 2018 - 2019

Pickens County
11th & 12th Graders

CALENDAR

Application Deadline

August 17, 2018

5:00 PM

Meet & Greet

Monday, August 27, 2018

5:00 – 7:30 PM

Overnight Orientation / Team Building

September 2018

October Session

Monday, October 22, 2018

6:00 – 8:00 PM

November Session

TBA

December Session

Monday, December 17, 2018

6:00 – 8:00 PM

January Session

Monday, January 21, 2019

6:00 – 8:00 PM

February Session

Monday, February 25, 2019

6:00 – 8:00 PM

March Session

Monday, March 25, 2019

6:00 – 8:00 PM

April Session

Tuesday, April 22, 2019

6:00 – 8:00 PM

Graduation

Tuesday, May 7, 2019

6:30 – 8:30 PM

Our Mission:

To expose the youth of Pickens County to leadership experiences by creating an environment where they can make a positive impact on issues that affect teens.

Our Goals:

- Identify high school students who are leaders or have demonstrated leadership potential.
- Give young people the knowledge, tools, and contacts to create successful leaders.
- Instill and nurture a sense of social responsibility in our youth.
- Offer a forum for young leaders to express their needs, goals, and opinions.
- Explore the diverse facets of Pickens County's social affairs, government and business.
- Provide participants a chance to serve their community.
- Present young leaders with a renewing and fun experience.

Orientation / Team Building

What is Youth Leadership? Who are your fellow classmates? What does leadership mean? How well do you know your fellow classmates? Can you operate as a team? Bond with your classmates, learn about your different leadership skills and get to know each other while having fun!

Monthly Sessions Include:

- County Government
- Etiquette
- Financial and Interview Skills
- State Government
- Interviews
- Local Law Enforcement
- Social Media, Soft Skills, and Community Service

Graduation – May 7, 2019 from 6:30 – 8:30 pm

A time to celebrate your accomplishments and share them with your family and friends!

Completed applications must be returned to **Rachel Whitman** at the Pickens County Chamber of Commerce **by 5:00 pm on August 17, 2018**. These can be returned in person, by mail, or by email:

- Mail:
 - o 500 Stegall Drive Jasper, GA 30143
- Email:
 - o info@pickenschamber.com

APPLICATION CHECKLIST

Please type or print. Only completed applications will be considered, and must include:

1. Applicant's Submittal. Fill out completely, including the back page.
2. Guardian's Waiver. Have this completed by your parent or guardian and include with your completed application.
3. Adult Reference. Have this completed by an adult who is not related to you and include with your completed application.
4. Peer Reference. Have this completed by one of your peers and include with your completed application.

I understand that I must complete the Applicant's Submittal portion of this by myself, and state that no one else has completed the application on my behalf. _____ YES _____ NO

REQUIREMENTS OF THE PROGRAM

One hundred percent (100%) attendance is expected of each student. **I have compared my schedule with the Program Calendar dates attached. If I am selected, I commit to attend every one of the program sessions.**

If I am selected, I agree to attend one meeting of the Jasper City Council, Pickens County School Board or the Pickens County Board of Commissioners. This meeting must be attended by April 11, 2019. Each participant must obtain the signature of the Mayor, Superintendent or Commission Chair to testify their presence at the meeting

If I am selected, I agree to sell a minimum of 12 golf balls (1 sheet) for the Annual Snowball Golf Tournament by the November Session. Proceeds of this golf tournament fund the Leadership and Youth Leadership Programs. Instructions on the golf balls sales and the requirements of each participant will be provided at the August Orientation/Team Building Session.

If I am selected, I understand that the Youth Leadership Pickens Class of 2018-2019 will participate in monthly community service projects (October – March Sessions) and I will participate 100%. The community service projects will be voted on and chosen by the Class of 2018-2019 at the August Orientation/Team Building Session and a calendar of the chosen community service projects will be distributed at the September Session.

If I am selected, I agree that I will wear casual business attire to each of the activities unless informed otherwise, out of respect for the professional establishments we will be visiting.

I further understand that email will be the primary method of communication between the program leaders and the participants. **If I am selected, I will have an active email account that I will check daily for communication about the program.**

By signing below, I am stating that I have read and agree to the above **REQUIREMENTS OF THE PROGRAM.**

**There is a required Meet & Greet for the students and their parents/guardians at the Chamber of Commerce on Monday, August 27, 2018 from 5:00 – 7:30 pm.
This is mandatory to participate in the 2018-2019 Youth Leadership Class.**

Signature of Applicant

Date

PERSONAL INFORMATION (Please print legibly)

Name _____

Email Address _____

Home Address _____

City _____ Zip _____

Name you prefer to be called _____

Cell phone _____

Date of Birth _____

School _____

T-shirt size _____

GENERAL INFORMATION – attach extra sheet if necessary

1. Using a few phrases or adjectives, describe yourself (personality, character, etc.)

2. Briefly describe two of the most significant problems facing Pickens County.

3. Give a possible solution to one of the problems you listed.

ORGANIZATIONS AND ACTIVITIES

List any school, volunteer, social, athletic, artistic or other activities or groups in which you have participated during the last four years.

SCHOOL EXPERIENCE

List up to three special awards, honors or recognitions you have received from the 7th through 10th grades for academic or community related activities.

1 _____

2 _____

3 _____

WORK EXPERIENCE

List any part-time job experience you have, paid or volunteer, and briefly tell what is involved.

EMERGENCY CONTACT INFORMATION

Name _____

Home Address _____

Home Phone _____ Cell Phone _____

Primary Emergency Contact

Name _____

Relationship to Contact _____

Phone Number _____ Cell Phone _____

Home Address (if different than contact)

Secondary Emergency Contact

Name _____

Relationship to Contact _____

Phone Number _____ Cell Phone _____

Home Address (if different than contact)

Other Information

Allergies _____
