



LEAPS

Learning | Exploration | Aspiration | Preparation | Success

## 2018/19 LEAPS TEEN ADVISORY COMMITTEE APPLICATION FORM

### THANK YOU FOR YOUR INTEREST!

We are looking for high school students from diverse backgrounds and perspectives to serve on the 2018/19 LEAPS Teen Advisory Committee (TAC). **All public high school students from DeWitt, Karnes and LaSalle Counties are welcome—no previous leadership experience required.** If you have any questions or concerns about the application, please contact Arcelia at (817) 880-1242 or [a.delarosa@iyfnet.org](mailto:a.delarosa@iyfnet.org).

A digital version of this application can be found at [www.leaps4you.com](http://www.leaps4you.com).

### APPLICATION INFORMATION

NAME \_\_\_\_\_

GENDER  MALE  FEMALE  OTHER

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_

CELL PHONE \_\_\_\_\_

SCHOOL \_\_\_\_\_

GRADE  SENIOR  UNDERCLASSMAN BIRTHDATE \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ PHONE \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ PHONE \_\_\_\_\_

BEST WAY TO REACH YOU  EMAIL  PHONE  TEXT  OTHER \_\_\_\_\_

## ESSAY QUESTIONS

*OK, we know this doesn't sound like a lot of fun, but don't worry, we tried to make these questions exciting! We would like to know more about who you are. Relax, have fun, and be creative!*

*Please answer the following questions. Use a separate sheet of paper, and attach your answers to your completed application form. We prefer typed responses, but if you do choose to handwrite, please make sure we can read your answers!*

1. We want to get to know who you are! Choose three words that you think best describe you, and explain why.
2. Please share with us what you are involved with in your school and/or outside of school. This could be clubs, sports teams, interest groups, hobbies, ways you help out around the household, a job you have, etc.
3. Everyone has ideas about things that need to be improved in their community. If you could change three things in your community, what would they be and why? What are some ideas you have that could help change these things?
4. Why are you interested in joining the LEAPS Teen Advisory Committee?
5. We want to make sure we know what makes each of our TAC members unique, so please tell us what unique qualities, talents, and experiences you have that would benefit this organization. For example, are you super organized? Are you a good photographer? Have you had experience planning events? Have you had a unique life experience that you can share with others? We want to know what you bring to the table!
6. We know that many issues face youth today. From the list below, please select the top 3 issues you feel are important to address for youth in our community. Is there an issue not on the list? Fill in the blank below and tell us about it!
  - Arts
  - Bullying
  - Diversity/Inclusion
  - Education
  - Environment
  - Health
  - Violence/victimization
  - Mentoring
  - Poverty
  - Recreation
  - Substance Abuse
  - Teen Pregnancy
  - Homelessness/Housing
  - Juvenile Delinquency
  - Technology
  - Hunger
  - Mental Health Issues
  - Other\_\_\_\_\_
7. Out of the issues you selected above, which one do you feel is the top issue facing youth today and why?

## COMMITMENT PLEDGE

### **Please Note:**

While it is true that being a member of the LEAPS Teen Advisory Committee may “look good” on a resume or college application, we strongly discourage anyone who is joining solely for that reason. There is time and commitment involved. This is a group of youth who are committed to making a difference in our community, who want to have fun, learn about local government, have a voice and use it, and want to represent the youth in the Eagle Ford Shale region.

Please be aware of the following requirements of all members:

- Attend monthly meetings of the Teen Advisory Committee (may be virtual or in person)
- Represent the interests of the student body of your school
- Actively participate in meetings and projects – everyone’s ideas are important!

Your signature below constitutes a pledge that your responses to the questions in this application are accurate and entirely your work. In addition, you understand and will follow the requirements of the LEAPS Teen Advisory Committee if you are selected to represent your school.

Signature \_\_\_\_\_

Date \_\_\_\_\_

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**APPLICATION DEADLINE IS NOVEMBER 17, 2018 AT MIDNIGHT.**

**Please deliver, mail, or email this application, including your essay answers, to:**

**Arcelia De La Rosa**  
**LEAPS Program Coordinator**  
8311 NE Zac Lentz Pkwy  
#436  
Victoria, Texas 77904  
Phone: (817) 880-1242  
a.delarosa@iyfnet.org

