

The Great Summer Youth Academy 2019

APPLICATION FORM

Parents: This application should be completed by your child and needs to be submitted with one letter of reference from a non-family member. Applications are due by Wednesday, May 22nd. Participants will be selected by lottery and notified by May 29th.

Parent's Name: _____

Parent's Email: _____

Applicant Directions: Complete both parts of this application. Take your time and think carefully about your answers. Please write very neatly and use extra paper if you need.

Part 1: *Please tell us a little about yourself.*

Your Name: _____ School: _____ Upcoming grade: _____

Mailing Address: _____ City: _____ Zip: _____

Phone: _____ Date of Birth: _____ Gender: _____

Allergies: _____

Check T-Shirt Size:

YOUTH SIZES = YS YM YL

ADULT SIZES = S M L XL 2XL

Session: 6th Grade (July 8th to July 12th)

or

7th & 8th Grade (July 15th to July 19th)

1. What do you think you want to be when you're an adult and why?

2. Who is the most important role model in your life right now and why?

3. What do you hope to learn at The Great Summer Youth Academy?

4. Have you attended The Great Summer Youth Academy in the past? No Yes (year: _____)

Part 2: Ask one adult (example: teacher, neighbor or adult family friend), to write a letter of reference for you. The letter should tell us about you and how The Great Summer Youth Academy might support you. Ask the adult to put the letter in a **sealed envelope** and attach it to this application.