

# Greater Vidalia® Youth Leadership

208 East First Street, Vidalia, Georgia 30474

The Greater Vidalia<sup>®</sup> Youth Leadership program is for high school juniors and seniors. The program is designed to develop leadership potential and to acquaint participants with community needs, problems, and resources through interaction with community leaders and decision-makers.

#### **MISSION STATEMENT**

To enhance and apply leadership skills in the world around us by becoming active youth in our community, by influencing others in a positive way, and by being sensitive to the needs of people every day.

### **APPLICATION FOR SELECTION**

GREATER VIDALIA® YOUTH LEADERSHIP CLASS OF 2025/2026

Complete and return to your school counselor
OR

Email to: ambero@greatervidaliachamber.com

Application Deadline: May 16, 2025

Please type or print clearly.

GRADE (next year) \_\_\_\_\_

(first)				
HOME ADDRESS:_				
	(street and num	aber) (city/state)	(Z1p)	
HOME PHONE:	ME PHONE: CELL PHONE:			
MAILING ADDRESS	S: (If different from Hom P. 0. Box or Street #	e Address) (city/state)	(zip)	
MAILING ADDRESS			(zip)	
		(city/state)		
EMAIL ADDRESS:_	P. O. Box or Street #	(city/state)		

supervisory capacity.) Name	Address	<u>Phone</u>	Relationship	
			-	
List two (2) special inter	rests or hobbies.			
1				
۷				
<u>ACTIVITIES</u>				
Please list below in orde	er of importance to v	you six school acti	vities in which you are inv	olved
School Activity	or or importance to y		nvolved Leadersh	
1				
2				
3				
4				
5.				
List six (6) civic, religion your role.	us, social, or other a	ctivities in which y	ou have participated. Indi-	cate date
Activity	]	<u>Date</u>	Leadership Role	
1				
2				
3				
4				
5				
AWARDS				
List any honors and/or a	wards of special size	nificanca you have	racaivad	
List any nonois and/or a	iwarus or special sig.	mneance you nave	TOUTIVEU.	

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]	In your own words, define leadership.
-	Are you a rising Senior?  If yes, will you be enrolled in college classes during the GVYL program?
	What would you hope to gain from your involvement in the Youth Leadership Program and what do feel you could bring to the program?
	What's one way you'd like to grow as a leader in the next year? How would being a part of our Youth Leadership Program enable you to do this?
	How have you been a leader or displayed leadership skills or abilities?
]	Describe a decision you made that you regret and what you learned from it.

There is a participation fee of \$50.00, payable upon selection.
Should this present a problem, scholarships are available.
Please contact Amber O'Connor at the Chamber for more information.

**Application Deadline: May 16, 2025** 

#### COMMITMENT TO THIS PROGRAM

- a. The time commitment is for 7 sessions. This is a serious commitment. Attendance at all sessions is mandatory. Absence due to personal illness, death in the family or a circumstance beyond your control may be excused provided GVYL Directors are notified in advance. However, attendance at orientation is required to graduate from the program. You may be dropped from the class if you are absent for more than one session. If you must leave early for any reason, notification must be given to the GVYL Directors in advance and you must have a note signed by a responsible party (teacher, coach, parent, etc.) stating the reason you are leaving before the end of the session. If you do have an absence that is not excused by the GVYL Directors, you must write a paper on a subject given to you by one of the leaders. This is mandatory to be eligible for graduation from the program.
- b. Participants in the Greater Vidalia<sup>®</sup> Youth Leadership Program must have the support and commitment of their parents or guardians. The signature of a parent/guardian indicates their permission and support of the applicant's participation.
- c. Participants in the Greater Vidalia<sup>®</sup> Youth Leadership Program may be asked to share what they learn with fellow students through special programs in organizations in which they are affiliated and in their school.

By signing I AM committing myself to the above conditions of the program and my willingness to share in any follow-up programs.

Signature of Participant	Date		
Signature of Parent/Guardian	Date		

## **Program Presented By:**

