G.R.E.A.T. Summer Youth Academy 2017 APPLICATION FORM

G.R.E.A.T. Summer Youth Academy, 235 S. Auburn St, Grass Valley, CA 95945 Office: (530) 273-4059 Fax: (530) 273-4059 Email: <u>kwallack-eisen@nevco.org</u>

Parents: Please remember this application should be completed by your child. The completed application and one letter of reference must be delivered or mailed to the Family Resource Center at 235 South Auburn Street, Grass Valley. Due date:

Friday MAY 12th 2017!

Participants will be selected by lottery and notified by May 19th.

Applicant Directions: Complete all 3 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:			
Mailing Address:	City:	Zip:		
Phone:	Date of Birth:	Gender: Male Female		
Allergies:		Upcoming grade:		
Session: 🗌 5 th Grade	e (June 19th to June 23rd) 🛛 🗍 6 🗌 7 th & 8 th Grade (July 10 t	5 th Grade (June 26th to June 30th) to July 14th)		
<u>Check T-Shirt Size:</u>	YOUTH SIZES = \Box YS \Box YMADULT SIZES = \Box S \Box M			
1. What do you think	you want to be when you're an ad	ult and why?		
2. Who is the most im	portant role model in your life rig	ht now and why?		

 $\underline{OVER} \rightarrow$

3. What do you hope to learn at the G.R.E.A.T. Summer Youth Academy?

4. Since we can only select 25 students from each grade level, please explain why you should be selected.

5. How did you hear about the GREAT Summer Youth Academy?

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Part 2: Please read the following pledge very carefully. When finished, if you are in agreement with what it says, sign and date the pledge.

Pledge: In submitting this application, I am confirming that I want to be selected as a participant in the G.R.E.A.T. Summer Youth Academy. I promise to maintain a *positive attitude* when being taught and mentored. I promise to follow instructions and *comply with all rules*. I promise to maintain the highest standards of personal conduct, including being prepared, on time, honest, and *behaving appropriately*.

I understand that if at any time the G.R.E.A.T. Summer Youth Academy staff determines that I am <u>not</u> conducting myself as described above, I may be dismissed from the program.

Your Signature:	Date: // 2017
Parent/Guardian Signature:	Date: // 2017
Parent/Guardian Printed Name:	
Parent/Guardian email:	(write clearly)

☐ Yes, I will need financial assistance as I cannot afford the \$125 total (\$25.00/day).

Part 3: 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.