



National Youth Leadership Network

Conference Application

Section I: Biographical Information

(Please put an X in front of your selection, thanks)

Name: _____

Gender: Female Male Date of Birth: _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-mail Address: _____

The following information will remain confidential and will only be used to insure that our participants represent diverse backgrounds and disabilities.

What is the name of your disability? _____

How would you describe your primary disability?

Mobility Hearing Visual Learning

Cognitive Health Emotional/Behavior

Other _____

Check here if you use alternate formats.

Please tell us what formats you use: _____

To which race/ethnicity do you belong [Check all that apply]?

African American Hispanic Caucasian
 Asian Native American/AK Native Pacific Islander
 Other [please describe] _____

Are you from a: Small town or rural area Mid-sized town
 City or suburb

Have you ever attended your State's Youth Leadership Forum [YLF]?

Yes No If yes, what year? _____

Are you currently a student? Yes No

High School College / Technical School

Career Interest/Major: _____

Are you currently employed? Yes No

Job Title: _____

How do you want to get information?

E-mail Hard copy by snail mail Telephone

Do you have regular access to e-mail? Yes No

If yes, how often do you access it?

Daily Weekly Monthly

Did anyone assist you with filling out this application for disability reasons?

Yes No If yes, please give the following information.

Name of support person: _____

Relation to the applicant [e.g., parent, friend]: _____

This person's phone number: _____

Section II: Essays

Please attach your answers to the essay questions. Limit your answers to no more than one page per question, 14 point font (answers recorded on audio tape must be kept to a maximum of 500 words). If you can access a computer, send your essays on a diskette with your name on it, as well as a hard copy. Otherwise, please write as legibly as possible.

1. Describe two important experiences you have had as a young person with a disability and what you learned from these experiences.
2. List and briefly explain any activities you have been involved in and any honors or awards you have received. Feel free to include any future plans or activities (be specific in explaining how they relate to leadership and / or disability).
3. How have your leadership skills been developed, being an individual with a disability? What skill or characteristic do you feel is the most important in a leader?

Section III: Letter of Recommendation Please attach your letter of recommendation in a separate, sealed envelope.

Section IV: Signature

This application was completed to the best of my ability. All information about myself is truthful and factual to the best of my knowledge. I completed this application on my own and/or with the assistance of the support person identified above.

Signature of Applicant

Date

Signature of Support Person if Used

Date

SEND YOUR COMPLETED APPLICATION PACKET TO:

By Mail

NYLN Conference
OHSU Center on Self-Determination
3608 SE Powell Blvd.
Portland, OR 97202

Fax: 503-232-6423

By E-Mail

Address: guerrere@ohsu.edu
Send in any of the following formats:

- ASCII Text
- MS Word
- Word Perfect

In the subject line of your e-mail, type: "NYLN"

