



YOUTH LEADERSHIP FORUM 2010

c/o Karen P. Halliday, Director
202 Highwood Dr.
South Glastonbury, CT 06073

MEMORANDUM

TO: Directors of Special Education and Pupil Services, High School Special Education Department Heads, Transition Coordinators, Private Special Education Facilities, BRS Counselors, BESB Counselors, DDS Case Managers, Centers for Independent Living, Parent Groups

FROM: Karen Halliday, Director, Kathleen Kabara, President, Connecticut Youth Leadership Project, Inc.

SUBJECT: ENCLOSED APPLICATION FORM FOR THE YOUTH LEADERSHIP FORUM FOR STUDENTS WITH DISABILITIES – (YLF) – 2010

DATE: October 2009

Enclosed is an application form for the twelfth annual Youth Leadership Forum for Students with Disabilities (YLF) scheduled for July 26-July 29, 2010 at the University of Connecticut, Storrs campus.

The program will bring together forty high school students with disabilities from throughout Connecticut for a four-day training forum focusing on enhancing community leadership skills. The forum will provide a concentrated educational and motivational experience for the students selected through a formal, competitive process.

The delegates will explore personal leadership skills, define career goals and leave the forum with a very specific action plan that describes what they will do back in their local communities to enhance the lives of people with disabilities. Students who are accepted to YLF will be required to attend follow-up sessions after the forum to implement their Community Action Plans.

I am requesting that you make available copies of this application to any current **sophomore** or **junior** with a disability*.

It is the goal of the YLF planning committee to select students from all regions of Connecticut, who represent a wide range of disabilities and ethnic backgrounds.

Thank you for your assistance in promoting this important program for young adults with disabilities in Connecticut. You may download additional copies of the application by logging on to our website – www.ctyyp.org

If you have any questions about the program, please feel free to contact Karen Halliday at (860) 633-8403 or KarenH1203@aol.com or Kathleen Kabara at (860) 424-5068 or Kathleen.kabara@ct.gov.

*Students in non-graded programs must be returning to high school for at least 1 year.



MEMORANDUM

TO: High School Sophomores and Juniors with Disabilities*

FROM: Karen Halliday, Director, Kathleen Kabara, President
Connecticut Youth Leadership Project, Inc.

SUBJECT: AN INVITATION FOR YOU TO APPLY FOR THE YOUTH LEADERSHIP
FORUM (YLF) FOR STUDENTS WITH DISABILITIES - 2010

DATE: October 2009

Enclosed is an application for our annual Youth Leadership Forum for Students with Disabilities (YLF). 2010 will be the twelfth year we are offering this innovative leadership program. The four-day forum will include many exciting educational and motivational activities to assist you in strengthening your leadership skills. The forum will take place July 26- July 29, 2010 at the University of Connecticut, Storrs campus.

We are inviting you to apply, and are asking for your help in recruiting other students to apply for the forum. Completed application packets must be postmarked by **January 15, 2010** and mailed to the address noted on the enclosed application. Through a competitive process, approximately 40 students will be selected to attend the forum. **If you are accepted to YLF you will be required to attend follow-up sessions after the forum to implement your Community Action Plans.**

It is the goal of the YLF planning committee to select students from all regions of Connecticut, who represent a wide range of disabilities and ethnic backgrounds.

The Youth Leadership Forum is sponsored through the cooperative effort of the public and private sector in Connecticut. There is no cost for you to attend the forum.

All information in your application is strictly confidential and will only be shared with members of the YLF selection committee. Applications may also be downloaded by accessing our website at www.ctylp.org

If you have any questions about the program, please feel free to contact Karen Halliday at (860) 633-8403 or KarenH1203@aol.com or Kathleen Kabara at (860) 424-5068 or Kathleen.Kabara@ct.gov.

APPLICATION DEADLINE Extended: February 26, 2010

**Students in non-graded programs must be returning to high school for at least 1 year.*

Connecticut Youth Leadership Forum - 2010

APPLICATION FORM

DEADLINE FOR POSTMARK ON MAILED APPLICATION: JANUARY 15, 2010

- Applicants must complete ALL information on pages 1 through 4 of this application
- Please type or print with black ink.
- Mail the application to the address on the last page (page 4)
- Please see page 5 for additional application instructions.

Personal Information:

Male ____ Female ____

Student's Last Name First Middle

Mailing Address City State Zip Code

Home Telephone Number (with area code) Birthdate

Email address (please print clearly)

Ethnicity/Disability Information:

Race: _____

Disability: Please check **all** that apply:

____ LEARNING DISABILITY

____ DEAF

____ ADD/ADHD

____ HEARING IMPAIRED

____ MENTAL HEALTH DISABILITY

____ I use sign language

____ NEUROMUSCULAR DISABILITY

____ I use live captioning

____ I use lip reading

____ I use an assistive listening device

____ MULTIPLE DISABILITIES:

____ I use an FM system

____ I use a loop system

___ BLIND

___ DEVELOPMENTAL DISABILITY

___ VISUAL DISABILITY

___ Autism

___ I read with Braille

___ Traumatic Brain Injury

___ I read with large print

___ Intellectual Disability

___ I require audio output

___ Other: _____

___ ORTHOPEDIC DISABILITY

___ I use a wheelchair

___ OTHER (describe) _____

School and Community Involvement:

Name of High School

School Mailing Address

City

State

Zip Code

High School Counselor's Name

School Telephone (with area code)

Grade level on January 15, 2010

Date Graduation Expected

Please list the school classes in which you are currently enrolled:

Briefly list your involvement with your school and community. This may include any offices you held, club memberships, after school activities or work experiences. List the length of involvement, the grade level you were in at the time of participation, and the name of an adult contact with whom you worked.

School Activities:

Activity

Adult Contact

Dates

Grade Level

Community Activities:

Activity	Adult Contact	Dates

Work Experience (Paid or Non-paid):

Jobs Held	Adult Contact	Dates

Letters of Recommendations:

Please attach two letters of recommendation, which describe your demonstrated leadership skills or your leadership potential. One letter **must** be from a high school representative and one **must** be from a community representative outside your school.

List the name, position/title and telephone number of your two recommendations.

1. _____
Name Position/Title

Organization Telephone Number (with area code)

2. _____
Name Position/Title

Organization Telephone Number (with area code)

Required Essay:

Your answers to the following questions will be used to assess your potential to benefit from and contribute to this leadership forum. Please write your responses on separate sheets of paper and attach them to your application packet. Your total response to all four of these topics should not exceed four (4) typewritten, double-spaced pages. **(Responses must be double-spaced and either typewritten or printed in black ink).**

1. **Leadership**– Describe what the term “leadership” means to you
2. **Positive Influences** - In terms of leadership, tell us about two people who have positively influence your life. (Family, teachers, counselors, friends, public officials or celebrities are appropriate examples).
3. **Experiences as a person with a disability** - Describe two important experiences you have had as a young person with a disability. (Please be specific about your examples as they relate to your disability).
4. **Future Plans** – Describe your plans after high school graduation.

Signature of Student

Date

Signature of Parent

Date

Thank you for completing this application. Applications must be postmarked no later than **JANUARY 15, 2010.**

Mailing address for application:

**Karen Halliday, Director
Connecticut Youth Leadership Forum
202 Highwood Dr.
South Glastonbury, CT 06073**

KEEP THIS PAGE, DO NOT MAIL IT WITH YOUR APPLICATION

**HOW STUDENT DELEGATES WILL BE SELECTED AND
APPLICATION INSTRUCTIONS FOR STUDENTS**

1. To be eligible for the Youth Leadership Forum - 2010, the student must:
 - a. Have a disability, as defined by the Americans with Disability Act;
 - b. Be in 10th or 11th grade as of January 15, 2010, or if students are in non-graded programs they must be returning to high school for at least 1 year;
 - c. Have demonstrated leadership potential in the school and community;
 - d. Have **Medical Insurance**; and
 - e. Reside in Connecticut.

2. Student applicants must mail their completed application no later than **January 15, 2010** to:

**Karen Halliday, Director
Connecticut Youth Leadership Forum
202 Highwood Dr.
South Glastonbury, CT 06073**

3. Semi-finalists will be selected and contacted by telephone to arrange a personal interview. The interview will be conducted by a panel coordinated by the Youth Leadership Project, Board of Directors. Interviews will take place in February – March 2010.

4. All applicants will be notified by letter whether they have been selected to attend the forum. Letters will be mailed by mid-April. Approximately 40 students will be selected to attend.

5. After being selected, students will be asked to complete a confirmation form and provide additional information to the Planning Committee.

6. All appropriate expenses will be paid by the Youth Leadership Forum, including lodging, food, materials, interpreters for deaf students and personal care assistants for students with physical disabilities.

If you have any questions, contact:

Karen Halliday at (860) 633-8403 or KarenH1203@aol.com
Kathleen Kabara at (860) 424-5068 or Kathleen.Kabara@ct.gov

