## **Greene** County

# Youth Leadership

## Training Tomorrow's Leaders Today



A program of the

**Greene County Partnership** 

**Application Packet** 

2025–2026

### **Program Overview**

**SELECTION PROCESS** 

#### MISSION

Greene County Youth Leadership believes that all youth are gifted and are capable of making a positive difference in their communities. Through this program, we hope to empower selected youth as leaders and trustees of our community, to establish exemplary leadership skills that will have a positive impact upon the decisions they make and will be implemented in their day-to-day activities to enable them to use these skills with their families, peers, schools and community.

#### **PROGRAM SCHEDULE**

Orientation/Opening Retreat — August 4, 2025 Class Session Sept. 5, 2025 7:45 a.m.—2:45 p.m. Class Session Oct.17, 2025 7:45 a.m.—2:45 p.m. Class Session December 2025 7:45 a.m.—2:45 p.m. Class Session Jan. 9, 2026 7:45 a.m.—2:45 p.m. Class Session Feb. 6, 2026 7:45 a.m.—2:45 p.m. Class Session March 6, 2026 7:45 a.m.—2:45 p.m. Class Session April 1, 2026 7:45 a.m.—2:45 p.m. Class Session April 1, 2026 Nashville trip Recognition & Graduation Ceremonies April 22, 2026 <u>Sessions will include:</u> Interactive Leadership skills *Emphasizing Local and State Government, Agriculture, Health Care and Environment, Local Heritage/Religion, Business and Industry	DEADLINE: All applications, permission forms and reference forms must be <u>completed in their entirety leaving</u> NO questions unanswered, and received by Youth Leadership at the Greene County Partnership, 115 Academy Street, Greeneville, TN 37743 <i>no later than April 17, 2025.</i> Suggested references: Teacher, Counselor, Youth Leader, Minister, etc. Someone that is NOT related to you. The Selection Committee will review applications completed in their entirety and submitted by the <i>dead-</i> <i>line.</i>
<ul> <li>GOALS</li> <li>Address youth who have leadership potential</li> <li>Develop leadership skills in youth</li> <li>Provide an awareness of community resources and volunteer opportunities and promote participation in community service and responsible citizenship</li> <li>Develop pride in the community which will strengthen a life-long bond to the area</li> <li>Increase knowledge leading to greater tolerance, understanding and appreciation of human diversity, promoting healthy community building activities and preventing violence</li> </ul>	All applicants will be notified to schedule an interview. If accepted, a \$50 tuition fee will be required. Orientation for selected participants will be held in August 4 2025, at 8:00 a.m. prior to the Opening Retreat.
<ul> <li>EXPECTATIONS</li> <li>Respectful and exemplary leadership behavior</li> <li>Mandatory attendance at Opening Retreat</li> <li>No more than <u>one</u> excused absence at regular meetings. Two late arrivals or early departures is equivalent to one absence.</li> <li>Completion of necessary service time and assignments outside of session</li> <li>Students who fail to adhere to the above requirements may be dismissed from the program. The leadership steering committee will review each situation and</li> </ul>	CHECKLIST Completed application Two completed reference forms Parental/guardian permission School transcripts Applicants will not be considered unless ALL information is submitted to the Greene County Partnership by April 17, 2025

PLEASE DETACH THIS SHEET and KEEP FOR YOUR RECORDS

Applicants will not be considered unless this and all forms are completed in their entirety, leaving no questions unanswered and submitted by the deadline, April 17, 2025

make a decision regarding continued participation in

the program.



#### April 17, 2025

CONFIDENTIAL APPLICATION FOR GREENE COUNTY YOUTH LEADERSHIP

(Please type or print application. Complete all inf					rmation using this form only.)		
Name							
	(Last)		(First)	(Middle)		(Preferred)	
Home Address (Street Address)			(City)	(State)	(Zip)		
Cell Phone		Age	Date of	Birth 	year Sex male/female		
School				P	resent Grade_	_	
Parent(s) Name					T-\$	Shirt Size	
EMAIL:	EMAIL: (no school emails)						

\*\*The program is looking for a full application, so fill out as much as you can in the next two sections.

SCHOOL ACTIVITIES/PROJECTS/RESPONSIBILITIES							
List up to three school activities (including sports) in which you have participated during high school. Name of club/organization/activity School year involved Your role in the activity 1.							
2.							
3.							
If you haven't had the opportunity to participate in activities, check the reasons why.							
Time 🔄 Not interested 🖂 Transportation 🖂 Work 🖂 Financial reasons 🗌 Other							

#### **COMMUNITY VOLUNTEERING & ACTIVITIES**

List five activities that are <u>non-school related</u> in which you have volunteered during high school time period. Community/civic/religious/scouting, etc.) This is volunteer hours and not paid jobs or school activities. Name of organization/activity Dates involved Your role in the activity 1. 2. 3. 4. 5. If you haven't had the opportunity to participate in activities, check the reasons why. Time 🗌 Not interested 🗌 Transportation 🗌 Work 🗌 Financial reasons 🗋 Other 📄 \_\_\_\_\_\_

#### **RECOGNITION & AWARDS**

<u>List</u> any awards, honors or recognitions for academic, school, religious or community-related activities you have received over the last four years (you may attach a separate page).

List any part-time job experiences, paid or volunteer, and briefly tell what is involved: Do you currently have a part-time job?\_\_\_\_\_ How many hours per week? \_\_\_\_\_ Name of employer:

If selected for the Greene County Youth Leadership Program, are there other responsibilities (besides high school) that would exclude you from participating in the leadership training program between the hours of 7:45 a.m.—2:45 p.m.? If yes, explain:

#### **COMMUNITY ASSESSMENT**

In your opinion, what responsibility do youth have to help solve community problems?

If you could change anything in the Greene County area, what would it be and why?

#### CONCLUSION

How did you find out about Greene County Youth Leadership?

Friend	Teacher	☐ Counselor	🗆 Media 🛛 Parent	Presentation at school
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Wh	v do v	you want to	narticina	ate in Greene	- County	/ Youth	Leadership?
VVII	y uu j	you want to	μαιτισιμα		e County	/ I Outil	Leavership:

#### ATTENDANCE

If selected, you commit to attend the program Orientation, the Opening Retreat, each of the Class Program Sessions and Graduation. Full attendance by each participant is required for the youth leadership program to meet its objectives.

I understand and accept the requirements for Greene County Youth Leadership.

Student signature

Date

### \*\*A school transcript must be attached to the application packet\*\*

#### REFERENCES

Please give the attached reference forms to two adults whom know you well, excluding a relative (example: teacher, religious leader, youth club advisor, boss, etc.). Please only choose <u>ONE</u> teacher and one other reference instead of two teachers. Please send or bring completed reference forms to 115 Academy Street, Greeneville, TN 37743 by April 17, 2025.

Applicants will not be considered unless this and all forms are completed in their entirety, leaving no questions unanswered and submitted by the deadline, April 17, 2025

DUE

April 17, 2025

	1	DUE					
PARENTAL PERMISSION		April 17, 2025					
PARENTAL PERMISSION FOR							
	(student name)						
I am the parent/legal guardian of <u>(student name)</u> . I have read the Information on the Greene County Partnership Youth Leadership Program and am wiling to have my child participate. Greene County Youth Leadership, its agents and its employees have my full permission and consent to transport and otherwise provide transportation for my child by bus, private automobile, vans or other appropriate means of transportation in connection with all sessions of Greene County Youth Leadership during the school year in which he/she is a participant.							
I hereby release and hold harmless Greene County Youth Leadership, its members, agents, employees of and any individuals involved in the planning, organization or presentation of Greene County Youth Leadership programming, for any accident, injury, illness or any damage whatsoever related to the above mentioned student's attendance at or participation in any activity or session. I hereby agree that my child will abide by the rules set forth by the Greene County Youth Leadership Program.							
Parent/Legal Guardian (please prin	t)						
Signature of Parent/Legal Guardian	Signature of Parent/Legal Guardian						
Cell number	Home telephone						
Address							
PHOTO RELEASE							
Photos will be taken of the Youth Leadership class Greene County Partnership my permission to use t	and published in the local paper. I hereby giv he participants photo for promotional purpos	$r_e \square$ do not give $\square$ the es.					
Student signature							
Signature of Parent/Legal Guardian							
SCHOOL REQUIRMENTS							
Scheduled meeting days must be further from school will be considered a "set student in any way. Students are exparticipating in this program and are tests.	chool sponsored event" and will n spected to inform instructors of the	ot penalize the eir absences due to					
Please mail or deliver completed for Greene County Youth Leadership, 1		N 37743					

		DUE
		April 17, 2024
	GIVE THIS FORM TO EACH OF YOUR <u>T</u>	<b>WO</b> REFERENCES
REFERENCE FORM		
STUDENT NAME	-	
Program. It is an interactive, hands-o show leadership potential and an inter weight to the statements made by the to prepare such an assessment and gra and this side only, no additional paper	listed above is an applicant for the Greene County on experience with the community aimed at youth v rest in the community. The Selection Committee at references of the applicant. The committee is awar atefully acknowledges your help. Please type or pr r. References will be reviewed in confidence. <u>A rel o student, mailed to Greene County Partnership— untypartnership.net</u>	who are beginning to ttaches considerable re of the time necessary int. Use this form only lative cannot be used as
Name of Adult Reference	Position/Title	
School/Business/Religious Group/Org	anization	
Address	Work Phone	
Signature		

- 1. Length of time you have known applicant? How do you know the applicant?
- 2. What do you consider to be the applicant's primary talents or strengths?
- 3. Comment on the applicant's relationship with his/her peers?
- 4. Please describe one situation where you observed the applicant in a leadership role.
- 5. Please use the scale below to compare the applicant with other high school upperclassmen you have known:

	Excellent	Above Average	Average	Poor	Unable to Judge
Character					
Concern for others					
Responsibility					
Leadership					
Initiative					
Ability to work with others					
Maturity					
Oral communication skills					
Persistence and drive					
Interest in community affairs					

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		DUE
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	<b>GIVE THIS FORM TO EACH OF YOUR </b> <u>T</u>	<u>WO</u> REFERENCES
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