



**PARTICIPANT APPLICATION  
for  
2015-2016 COBB YOUTH LEADERSHIP**

The Cobb Chamber of Commerce, under the direction of the Leadership Cobb Alumni Association, sponsors the Cobb Youth Leadership program. The program focuses on developing leadership skills through interactive participation. The participants meet local, state and national leaders helping to frame their leadership style for the future. Another element of the program provides students from different schools a chance to meet and learn from each other as they expand their own leadership skills. Our community will reap the benefits from these relationships, as these students ultimately assume leadership positions in the future. Each participant must be a high school junior for school year 2015-2016 and a resident of Cobb County or a student in a Cobb County school.

CYL is co-chaired by two community volunteers:

**Mark Adams**  
Vinings Bank  
[madams@viningsbank.com](mailto:madams@viningsbank.com)

**Karen Lockhart**  
Campbell High School  
[karen.lockhart@cobbk12.org](mailto:karen.lockhart@cobbk12.org)

**INSTRUCTIONS:**

**This application must be completed in its entirety.**

**Required items include:**

- Student Application to CYL
- Letter of Recommendation
- Parent Consent Form

**Please print in ink or type.**

**Mail to:** **Cobb Chamber of Commerce**  
Attn: Katie Guice  
P.O. Box 671868  
Marietta, GA 30006

**To be eligible for selection, all applications must be postmarked by  
Friday, April 24, 2015.**

**Any application that is incomplete will not be considered.**

Name of Applicant (please print): \_\_\_\_\_

**BASIC INFORMATION:**

Full Name: \_\_\_\_\_

Name Called (first name): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ Mobile Phone Number: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Preferred Parent E-mail Address: \_\_\_\_\_

Father/Guardian Name: \_\_\_\_\_ Emergency Number: (\_\_\_\_) \_\_\_\_\_

Mother/Guardian Name: \_\_\_\_\_ Emergency Number: (\_\_\_\_) \_\_\_\_\_

**ACADEMICS:**

High School: \_\_\_\_\_ Year in school as of August 2014: \_\_\_\_\_

Grade Point Average (round to the nearest tenth): \_\_\_\_\_

Academic honors received in high school (please list): \_\_\_\_\_

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Name of Applicant (please print): \_\_\_\_\_

**CURRENT EXTRA-CURRICULAR ACTIVITIES:**

List here school activities, clubs, and athletic teams, if applicable: \_\_\_\_\_

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List here community and volunteer activities, if applicable: \_\_\_\_\_

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List here employment, if applicable: \_\_\_\_\_

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Name of Applicant (please print): \_\_\_\_\_

**LEADERSHIP EXPERIENCE:**

List offices/leadership positions held in clubs or organizations, projects you directed/initiated if applicable: \_\_\_\_\_

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Do you have a relative who is a Leadership Cobb Graduate? (This is the adult version of Cobb Youth Leadership) Circle one: YES / NO

*\*Disclaimer: This does not guarantee acceptance into the program, but is considered.*

If yes, name and relationship: \_\_\_\_\_  
\_\_\_\_\_

What personal characteristics/qualities do you have that you feel give you the potential to be a leader? \_\_\_\_\_

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Name of Applicant (please print): \_\_\_\_\_

What are your plans after high school graduation? \_\_\_\_\_

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If you are selected, how could Cobb Youth Leadership help you in achieving the above?

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Name of Applicant (please print): \_\_\_\_\_

**Please note: Your letter of recommendation from a teacher, employer, or friend of the family should be sent separately from your application.**

**ATTENDANCE:**

If selected, participants will need to make a commitment of their time and **ALL** program events. Students must notify Chamber staff and co-chairs at least 24 hours in advance of a conflict with a scheduled program.

*Participants that fail to attend any activity for any reason, may not be allowed to complete the program and his/her tuition fee will be forfeited.*

**2015-2016 SCHEDULE:**

Orientation – Monday, August 17, 2015 – 5:00PM to 8:30PM

Fall Retreat – Friday, September 25 – Sunday, September 27, 2015 (2 overnights)

Monday, October 19, 2015 – Evening Program, 5:00 p.m. to 8:30 p.m.

Monday, November 9, 2015 – Evening Program, 5:00 p.m. to 8:30 p.m.

Monday, December 7, 2015 – Evening Program, 5:00 p.m. to 8:30 p.m.

Monday, January 11, 2016 – Evening Program, 5:00 p.m. to 8:30 p.m.

Monday, February 8, 2016 – Evening Program, 5:00 p.m. to 8:30 p.m.

Monday, March 14, 2016 – Evening Program, 5:00 p.m. to 8:30 p.m.

Wednesday, March 30, 2016 – Evening Program, 5:00 p.m. to 8:30 p.m.

Spring Retreat – Saturday, April 16 – Sunday, April 17, 2016 (1 overnight)