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| Name of Applicant: |  |

**Applicant Instructions**

Give this form to a parent/legal guardian to approve your participation in Leadership Lincoln.

**Parent/Legal Guardian Instructions**

The student listed above is an applicant for Youth Leadership Lincoln. The program works to enhance the knowledge and leadership skills of high school students by motivating and empowering them to be committed to their community. The program seeks youth who are beginning to show leadership potential and an interest in the community.

Applicants will not be considered unless all application forms are postmarked (mail)/received (email) by the deadline. Contact Leadership Lincoln with any questions about this permission or the program. This form can be made available in alternate formats on request.

Leadership Lincoln Youth 27 (2023-2024) will include the following components:

1. Orientation

Thursday, August 10, 2023, 6:00-8:00pm

1. Opening Retreat

Attendance is required at the Opening Retreat. Applicants who are unable to attend the entire retreat, are not eligible for the program.

Friday, August 18, 2023 at 8:00am and Saturday, August 19, 2023 at 3:00pm

1. Leadership Lincoln State of the City Address

Tuesday, October 10, 2023, 7:30-9:00am

1. Seminars (locations to be announced)

Participants are expected to attend a minimum of 80% of seminars. Participants who miss more than 1.5 seminars will not meet the 80% requirement.

* **Thursday, September 21, 2023, 8:00am-3:00pm**
* **Thursday, October 19, 2023, 8:00am-3:00pm**
* **Thursday, November 16, 2023, 8:00am-3:00pm**
* **Saturday, December 2-Wednesday, December 6, 2023** 
  + Participants will select one date for three hours of volunteer service.
* **Thursday, January 25, 2024, 8:00am-3:00pm**
* **Thursday, February 22, 2024, 8:00am-3:00pm**
* **Thursday, March 28, 2024, 8:00am-3:00pm**
* **Thursday, April 25, 2024, 10:00am-7:00pm**

1. Unpacking Meetings (at Leadership Lincoln office):

Participants are expected to attend a minimum of two Unpacking meetings.

* **Tuesday, August 29, 2023, 7:00-8:30pm**
* **Wednesday, October 11, 2023, 7:00-8:30pm**
* **Tuesday, January 9, 2024, 7:00-8:30pm**
* **Tuesday, March 5, 2024, 7:00-8:30pm**
* **Tuesday, April 9, 2024, 7:00-8:30pm**

1. Service and Mentoring in 2024-2025

Participants are expected to attend a minimum of two seminars. At the final seminar of the sophomore year, participants will select which two seminars to attend and help facilitate during the junior year (based on interest in the topic or schedule availability).

Leadership Lincoln, its agents and its employees have my full permission and consent to transport and otherwise provide transportation for my child by public service bus, private automobile, vans, or other appropriate means of transportation in connection with all sessions of Leadership Lincoln.

I hereby release and hold harmless Leadership Lincoln, its members, agents, employees, or any individuals involved in the planning, organization, or presentation of Leadership Lincoln 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 of Leadership Lincoln.

I grant permission for my child to participate in fundraising activities for Leadership Lincoln, Inc.

(501(c)(3) nonprofit) and its programs, and I understand that such participation will only occur on a voluntary basis.

I grant to Leadership Lincoln, Inc. the right to photograph my child and the right to use those photographs, including reproductions or likenesses, with or without name, in any legal manner, for advertising, public relations, or otherwise, and in any media, whether copyrighted. I waive all right of inspection and approval and I release Leadership Lincoln, Inc. from all liability arising out of the exercise of these rights.

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| **Parent/Legal Guardian Signature** | |
| I am the parent/legal guardian of the above-named student. I have read the above information about the Leadership Lincoln Youth cohort and am willing to have my child participate should he/she/they be accepted. | |
| Name: |  |
| Address  (street, city, state, zip): |  |
| Phone: |  |
| Email: |  |
| Signature: |  |
| Date: |  |