

### Dear 2020 YAC Candidate,

Members of the Youth Advisory Council (YAC) are a vital part of the success of the Lindsey Meyer Teen Institute. YACs are individuals who have previously attended LMTI and serve as leaders and role models for current participants. YACs undergo an extensive interview, application, and training process to make them into the TI experts they are. So much of the success of LMTI depends on the youth staff. Each year we select individuals from throughout the state to serve as YACs. Want to apply? Here's what you need to know:

#### Responsibilities of a YAC include...

- · Remaining alcohol, tobacco, and other drug free
- · Appreciating and promoting diversity
- · Promoting a drug free lifestyle to others
- · Leading by example
- · Being a role model
- · Being a leader
- · Developing skits/workshops to be presented at LMTI Summer Leadership Conference
- · Assisting with group facilitation (Action Group and Process Group)
- · Assisting with cabin chaperoning duties
- · Representing your community and Action Group in a proper manner
- · Being an active member of your Action Group
- · Remaining an active prevention advocate before, during, and after camp
- · Attending follow up events
- Undergoing 5 mandatory training sessions for preparation (in addition to staff training)
- · Attending all days of LMTI Summer Leadership Conference

#### Trainings will include...

- ·Learning about the responsibilities of a YAC
- ·Workshops on various topics related to being a YAC
- ·Games, Icebreakers & Teambuilding Activities
- ·Cheers!
- ·Working together with other YACs to achieve common goals
- ·YACtion Groups

This year, the YAC Application process has an online component to make things easier than ever- but there are still items that you'll need to bring with you to your interview. Be sure to utilize the provided checklist to make sure that you haven't missed any steps!

Please note – Not every YAC is the same! New Jersey is diverse and our youth staff reflects that diversity. We look for a mix of individuals who are both "in front of the scenes" and "behind the scenes" individuals. If you enjoyed your experience at LMTI and would like to share what you learned with the 2020 group, we hope you will consider applying to be a YAC.

Please contact the LMTI office if you have any questions. Best of luck!

The LMTI Staff and the YAC Selection Committee

### **YACS Application Checklist**

#### □ STEP 1- ONLINE

□ Fill out and submit the online application: https://forms.gle/EMzdjP2GVo3DcZJy7

#### **DEADLINE**

Sunday, February 9th by 11:59pm

#### □ STEP 2- FORMS & RECOMMENDATIONS

Forms can be found at: pipnj.org/yac2020

- □ Fill out "Contact Info and Parent Consent Form"
  - □ Get parent/guardian initials (3)
  - ☐ Get parent/guardian signature (1)
- □ Hand out Recommendation Forms
  - □ Advisor (if not applicable, contact LMTI)
  - □ General (**NOT** a peer or family member)
- □ Collect Recommendation Forms in

sealed envelopes with signatures over the seals.

#### **DEADLINE**

BRING <u>ALL</u> (Contact Info & Parent Consent Form and (2) Recommendations) TO YOUR INTERVIEW\*

#### □ STEP 3- PICTURE

- □ Email a picture of yourself to cdonetz@pipnj.org with "YAC PHOTO – YOUR NAME" as the subject line
- □ This will help our selection committee out when they are reviewing applications

#### **DEADLINE**

Sunday, February 9th by 11:59pm

#### **STEP 4 - INTERVIEW**

□ Arrange your interview by signing up at <a href="http://www.slyreply.com/app/sheets/kb3im5tyqvsr/">http://www.slyreply.com/app/sheets/kb3im5tyqvsr/</a>

You will receive a confirmation e-mail after signing up. If you are having difficulty signing up or cannot make any of the open dates contact an LMTI staff member via email or phone. Email: cdonetz@pipnj.org
Subject- YOUR NAME- YAC INTERVIEW

Phone: 201-552-2264

#### **DEADLINE**

Sunday, February 9th by 11:59pm

North Jersey Interview Dates*					
11am-4:30pm	Secaucus, NJ*				
4pm-6pm	Secaucus, NJ*				
Friday, February 21 3pm-5pm					
11am-4:30pm	Secaucus, NJ*				
South Jersey Interview Date**					
3pm-6pm	Woodstown, NJ**				
	11am-4:30pm 4pm-6pm 3pm-5pm 11am-4:30pm ersey Interview Date				

<sup>\*</sup>These Interviews will be held at 110B Meadowlands Parkway, Suite 302 Secaucus NJ 07094

#### Conference and Training Information & Attendance Policy

#### The following is a list of YAC Training dates:

Saturday, April 18 10am-4pm Saturday, May 9 10am-4pm

Saturday, June 7 - Sunday June 8 5pm-12pm (TENTATIVE DATE)

Saturday, July 11 10am-4pm Saturday, August 8 10am-4pm

#### **Conference Dates:**

Session 1: Sunday, August 23, 2020– Friday August 28, 2020 Session 2: Sunday, August 30, 2020– Friday September 4, 2020

#### TRAINING ATTENDANCE POLICY

Attendance at each of these trainings is *critically* important to the success of the YACs. We expect that every effort will be made to attend *all* trainings. However, we do understand that conflicts may arise and therefore will allow all YACs **one (1)** excused absence. Beyond that, any additional absences will be reviewed by the LMTI staff on a case by case basis. Upon acceptance, YACs will be notified of the procedure they must follow regarding reporting an absence to the LMTI staff.

#### YAC Training Fee Schedule & Refund Policy

#### YAC Training Fee

The YAC Training fee is \$375.00. Each YAC's fee covers their five days of training, including one overnight. The stay at camp for the LMTI Summer Leadership Conference is provided by LMTI. The YAC Training fee is due no later than the second YAC training date, Saturday, May 4. If accepted as a YAC, you will receive a funding form to fill out for billing purposes. Please check with your advisor now so you know who will be paying your fee (i.e. your parents, school, or municipal alliance).

#### **Refund Policy**

- 1. A <u>full</u> refund will be given if a student drops out of, or is required to leave the YAC program <u>before the first training.</u>
- 2. A <u>partial</u> refund of \$150.00 will be given if the student drops out of, or is required to leave the YAC program <u>up until the overnight training</u>.
- 3. No refund will be given if a student drops out of, or is required to leave the YAC program after the overnight training.

<sup>\*\*</sup>These interviews will be conducted at Woodstown High School, 140 East Avenue, Woodstown, NJ 08098



## 2020 Youth Advisory Council Application YAC Applicant Contact Info and Parent Consent Form

I am a:	□ New Applicant	□ Returning Applicant	I was a YAC last ye	ar: □ Yes	□ No		
I previously attended: ☐ 2019 Summer Leadership Conference ☐ 2019 Fall Leadership Conference ☐ Both							
I am applying for: ☐ Session 1 (8/23-8/28) ☐ Session 2 (8/30-9/4) ☐ Both							
Personal Information							
First Name: Last Name: Pronouns:							
Mailing Ac	Idress:						
City:		Sta	ate:	Zip Code:			
Home Phone: Cell Phone:							
Applicant'	s Email Address:	,					
Age:	Date of Birth:	Gender: Cu	Current Grade (please circle): Freshman Sophomore Junior				
Advisor's	Name:	Ad	tion Group:				
Parent/G	uardian Initials & Sigr	nature					
I understand that, due to the number of YAC applicants LMTI receives each year, less than half of the outstanding young people who apply can be accepted. I further understand that by applying, my child (whether as a new or returning YAC) may receive a rejection form letter from the LMTI program. I agree to support both my child and the LMTI program in whatever decision is made by the selection committee. I understand that it is the policy of LMTI that individual reasons for any applicant's rejection are not personally discussed with the student, parent, or advisor.							
I understand the LMTI policy regarding training attendance and that my child is responsible for attending the listed trainings. Additional missed trainings may result in my child's dismissal from the YAC program.							
I understand the fee schedule and refund policy.  PLEASE INITIAL:							
I understand that if my student applies to attend either session of the conference, there is a chance that they may not attend with action group.  PLEASE INITIAL:							
Parent/Guardian Name (please print): Relationship:							
Parent/Guardian Signature: Date:			Date:				
Student Signature							
I understand that if accepted I am required to fulfill all YAC responsibilities and duties. That includes attending all pre-conference trainings, including Staff Training immediately preceding LMTI Summer Leadership Conference. Also, I must be present for the entire conference and may not arrive late or leave early. All of the answers on this application are based upon my own experiences and opinions.							
Student Signature:				Date:			



# **2020 YAC Application ADVISOR** RECOMMENDATION FORM

Instructions: Thank you for taking the time to fill out this form. Please complete form entirely and sign at the bottom of this sheet. Upon completion, place completed form into a <u>sealed envelope</u>, <u>put your signature over the seal and return to applicant</u> for inclusion in their application packet. Call (201) 552-2264 if you have any questions. Thank you!

dvisor's Name:					
aytime Phone Number: E-r	mail Address:				
For each of the following characteristics, please	rate the appli	cant ac	cording	to your e	xperiences.
	Average or Below Average	Good	Excellent	Outstanding	One of the Top Few I've Encountered In My Career
a. Leadership Ability/Potential					
3. Listening Skills					
C. Positive Attitude/Enthusiasm					
D. Ability to Express Themself					
E. Creativity					
Ability to Take Initiative					
G. Ability to Work with Others					
H. Involvement and Commitment to Action Group					
l. Respect Towards Others					
Comments (Please continue on back or attach ano	ther sheet or	letter	if desire	ed):	
Signature					
I certify that I have filled out this form based up my persona contacted by the YAC Selection Committee to further discussions.					erstand that I may
Signature:				Date:	



## 2020 YAC Application

## **GENERAL** RECOMMENDATION FORM

Instructions: Thank you for taking the time to fill out this form. Please complete form entirely and sign at the bottom of this sheet. Upon completion, place completed form into a <u>sealed envelope</u>, <u>put your signature over the seal and return to applicant</u> for inclusion in their application packet. Call (201) 552-2264 if you have any questions. Thank you!

Applicant's Name:							
Your Name:	Affilia	tion/Organizat	tion:				
Address:	City:				State:	Zip:	
Daytime Phone:		Relationship	to App	licant:			
For each of the following characteristics, please rate the applicant according to your experiences.							
		Average or Below Average	Good	Excellent	Outstanding	One of the Top Few I've Encountered In My Career	
A. Leadership Ability/Potential							
B. Listening Skills							
C. Positive Attitude/Enthusiasm							
D. Ability to Express Themself							
E. Creativity							
F. Ability to Take Initiative							
G. Ability to Work with Others							
H. Involvement and Commitment							
I. Respect Towards Others							
Comments (Please continue on back or attacl	h anotl	ner sheet or l	etter if	desire	<u>ed):</u>		
Signature							
I certify that I have filled out this form based up my personal experiences with the applicant and understand that I may be contacted by the YAC Selection Committee to further discuss my impressions of this candidate.							
Signature:					Date:		