



Class Commitments

1. To maximize your participation in the Washington County Teen Leadership each program participant is expected to attend every session. While emergencies do arise, participants may miss only one session, not including the mandatory sessions, without penalty. Participants who miss two full or partial sessions will not graduate from the program. All sessions begin approximately at 8:15 am and end no later than 3:00pm. Arriving late to a session and/or leaving early from a session (including lunch) will constitute a full absence, unless previously arranged. The Orientation and Wrap-Up/Graduation sessions are mandatory. The only reason you may miss a mandatory session is for a medical emergency, or an unavoidable schedule conflict with a mandatory school activity.
2. To show respect for the volunteer speakers and your fellow participants, cell phones will NOT be allowed during the sessions. There will be breaks given throughout the day to make any necessary calls. Phones will be taken up by the WCTL committee members if they are seen during a session and returned at the end of the day. We have a zero-tolerance policy on this issue.
3. I understand that there will be certain rules of conduct to follow. If I am acting in an inappropriate way, I understand that the program sponsors may contact my school and my parents/guardians to report my conduct. If I am a consistent disruption to the program because of my behavior, I understand that I may be asked to leave the program.
4. I understand that all information regarding the Washington County Teen Leadership program will be communicated with me via email and I will commit to regularly check my email account for updates.
5. Students participating in the WCTL program will follow a dress code during the sessions. A shirt and nametag will be provided to each student in the class at the Orientation session. **We ask that students wear this shirt with dress pants, skirts, or jeans with no rips or holes and appropriate shoes (no flip-flops, will be permitted).** Students may wear tennis shoes if they are clean and in good condition. For sessions that require a different dress code, you will be contacted in advance. Hats of any kind will not be permitted.
6. Class participants are responsible for their own transportation to and from the set meeting location for each class day, which will most likely be the Fayetteville Virtual Academy (this will be confirmed prior to the first class). Transportation throughout the day will be by bus. Every student must ride the bus.
7. The Wolf Pack Foundation will award a college scholarship of \$500 for the class participant who demonstrates overall leadership skills though-out the year. This scholarship will be awarded at graduation. Specific information on this will be discussed during the year.
8. Class participants will be expected to complete group community projects. Specific information on this will be discussed at orientation.
9. Lunch and snacks will be provided at each session (at no additional charge to the participant).
10. Class members may not use the name of the Leadership program in any political campaign to imply endorsement by the Fayetteville Chamber of Commerce, participating school districts, or program sponsors.

I have read and understand the general expectations and commitments of the Teen Leadership Experience. I commit to attending all sessions and being fully engaged throughout the year to gain the best experience from this program.

Signature of WCTL Participant

Signature of parent/guardian



Applicant Information Sheet

Please print or type your responses.

Student Information

Name: _____

Preferred Name: _____

Student Cell Phone: _____

E-mail address: _____

Parent/Guardian Information

Name of Parent/Guardian: _____

E-mail for above Parent/Guardian: _____

Best phone # for above Parent/Guardian: _____

Other Information

Allergies-please list food or other allergies

Please list any health/safety issues the programs should be aware of (example-diabetes, asthma, etc.):





Washington County Teen Leadership Class 2018-19

MEDIA RELEASE

Class Participant's Name (Please Print) _____

The Teen Leadership Program attracts media coverage at various times during the class year. We delight in sharing with the community about our class participants and what they are learning. By signing the statement below, you will be giving the Fayetteville Chamber of Commerce, the participating school districts and the participating sponsors, permission to use your name and likeness in any and all publicity about the Washington County Teen Leadership Program.

I hereby give my permission for the Fayetteville Chamber of Commerce, participating school districts, and participating sponsors, to use my name and likeness in all publicity about the Washington County Teen Leadership Program.

Signature of Participant _____

Signature of Guardian _____

Date _____



WASHINGTON COUNTY TEEN LEADERSHIP

Washington County Teen Leadership Class 2018-19

Transportation Release

Class Participant's Name (Please Print) _____

You have been selected as a participant for the 2018-19 Washington County Teen Leadership Class.

Ozark Regional Transit and each participating school District has graciously given the Washington County Teen Leadership program, free use of buses and licensed bus drivers to transport participants during class sessions. Participants will be transported to at least one other location, other than the Chamber office, during each class session. The Chamber office will have a detailed agenda of each location, our estimated time of arrival and our estimated time of departure. The Chamber office can facilitate contact with a class participant in case of an emergency.

Parents or guardians of each class participant must give Ozark Regional Transit, the Fayetteville Chamber of Commerce and each participating school district permission to transport students on the dates of Washington County Teen Leadership program.

I hereby give my permission for Ozark Regional Transit, the Fayetteville Chamber of Commerce and each participating school district to transport my child on Ozark Regional Transit buses and participating district school buses using licensed bus drivers.

Signature of Parent or Guardian _____ Date _____

