

LEADERSHIP AMARILLO & CANYON

Teen Program Application

Please fill out the form and return to Lisa Blake at lisa@leadershipamarillo.org

Or Mail to: Leadership Amarillo & Canyon, P. O. Box 52171, Amarillo, TX 79159



Applicant's First Name

Applicant's Last Name

School Currently Attending

Daytime Phone Number/Cell

Email

Applicant Commitment: I understand that attendance is vital to successful completion of Teen Leadership Amarillo & Canyon and I will devote the time and resources necessary to complete the program.

Agreed

Applicant's Signature

Parental/Guardian Agreement:

Applicants for the LAC program must have the support and commitment of their family. Your approval is necessary as an indication of support of the applicant's participation in the program.

Parental/Guardian Approval

Full Name

Date

What do you believe is most concerning in our community and why?

Parent/Guardian Name

Parent/Guardian Phone #

Student's Grade Level

References Please list the name and phone number of 2 adults in the community or teachers that can attest to your leadership abilities.

#1 Reference Name

#1 Reference Phone

#2 Reference Name

#2 Reference Phone