



## PERSONAL INFORMATION

Name (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_

Name you prefer to be called \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_

School \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

## SCHOOL EXPERIENCE

Other schools attended \_\_\_\_\_

Main area of interest in studies \_\_\_\_\_

## WORK EXPERIENCE

List any job experience, paid or volunteer, and briefly tell what it involved \_\_\_\_\_

Do you currently have a part time job? \_\_\_\_\_ How many hours per week? \_\_\_\_\_

Would your job interfere with your ability to attend the Leaders in Training program? \_\_\_\_\_

## ORGANIZATIONS AND ACTIVITIES

Please list in order of importance to you up to five school, volunteer, religious, social or other activities or organizations in which you have participate during the past four years.

ORGANIZATION/ACTIVITY	GRADE IN SCHOOL	RESPONSIBILITY/INVOLVEMENT
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____



**GENERAL INFORMATION** (attach additional sheets if needed)

1. Tell us about yourself! What adjectives best describe who you are? \_\_\_\_\_

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2. What qualities do you have that make you a good leader? \_\_\_\_\_

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3. Why are you interested in this program? \_\_\_\_\_

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4. Conflicts happen in a group setting. How do you deal with disagreements? \_\_\_\_\_

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5. What are you most excited to learn about in this program? \_\_\_\_\_

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**REFERENCES**

Please give one reference form to an unrelated adult: principal, counselor, teacher, coach, supervisor, family friend, etc. Give the second reference to one of your peers.

**1. Name of Adult Reference** \_\_\_\_\_

Position/Title/Relationship \_\_\_\_\_

Mailing Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

**2. Name of Peer Reference** \_\_\_\_\_

Position/Title/Relationship \_\_\_\_\_

Mailing Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

**SIGNATURES**

I understand the requirements of the program and commit to honor them if I am selected as part of the program.

\_\_\_\_\_  
Signature of Applicant Date

\_\_\_\_\_  
Signature of Parent Date

Applicants will be accepted on a rolling basis, all applications must be received by July 1<sup>st</sup> to be considered.

Please return application to: Leaders In Training (YCP)  
719 Cabot St  
Beverly, MA 021476  
Fax: 978.524.4501  
Email: info@pa.org





4. Comment on the applicant's relationships with his or her peers. \_\_\_\_\_

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5. Please comment on the applicant's ability to communicate with his or her peers, younger students, and adults. \_\_\_\_\_

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6. Please use the scale below to compare the applicant with other High School students you have known.

	Exceptional	Excellent	Good	Average	Poor	Unable to Judge
Character						
Responsibility						
Leadership						
Initiative						
Curiosity						
Ability to work with others						
Maturity						
Persistence and drive						
Concern for others						
Analytical ability						

7. Please include any other information about the applicant that you think would be useful for our knowledge. \_\_\_\_\_

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**PEER REFERENCE FORM**

PLEASE TYPE OR PRINT

**APPLICANT'S INFORMATION**

Name (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

**TO THE REFERENCE**

The person named above is an applicant for the Leaders in Training summer program at Project Adventure, Inc. We greatly value your time and energy. Thank you for completing this reference letter in a thorough and thoughtful manner.

Please return this form to:   Leaders in Training (YCP)  
719 Cabot St   Beverly, MA 021476  
Fax: 978.524.4501   Email: info@pa.org

**1. Name of Reference** \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Mailing Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

**1. For how long and in what capacity have you known the applicant?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**2. What do you consider the applicant's primary talents or strengths?** \_\_\_\_\_

\_\_\_\_\_

**3. What do you consider the applicant's chief weakness?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



4. Comment on the applicant's relationships with his or her peers. \_\_\_\_\_

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5. Please comment on the applicant's ability to communicate with his or her peers, younger students, and adults. \_\_\_\_\_

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6. Please use the scale below to compare the applicant with other High School students you have known.

	Exceptional	Excellent	Good	Average	Poor	Unable to Judge
Character						
Responsibility						
Leadership						
Initiative						
Curiosity						
Ability to work with others						
Friendliness						
Persistence and drive						
Concern for others						

7. Please include any other information about the applicant that you think would be useful for our knowledge. \_\_\_\_\_

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