GOLETA TEEN OF THE YEAR

COMMUNITY SERVICE AWARD PROGRAM

APPLICATION & PRESS RELEASE

ON A SEPARATE PAGE, please provide the information requested below and tell us about yourself by responding to the questions. Please give details, but limit your information to two pages.

Take special care in providing the information, as it will be used for publicity and by the judges as part of their judging <u>criteria</u>. It must be typed, and must follow the format below.

TELL US ABOUT YOU:

- Full name & nickname, if applicable (what you like to be called, if different from full name)
- Home and cell phone number(s), email address
- Street Address, city, zip
- Birthday, school and grade in school
- GPA from last report card (copy of most recent report card must accompany this application)
- Parent(s) name(s)
- 1. What are your interests and hobbies?
- 2. What are your community activities, offices held (in school, clubs, nonprofit organizations, youth groups, church, etc.)?

 Please note that we value quality time spent at fewer organizations rather than just a few hours spent at many organizations.
- 3. To which community organization do you contribute *most* of your time and energy?

About how much time do you devote to this organization, on average? (Days per month/hours per day) – feel free to elaborate as you deem appropriate

What have you contributed to this organization? What have YOU gained from serving this organization?

You may be brief on this topic here, as you will have an opportunity to expand on one of your favorite community

service activities later in the program.

- 4. To date, how many reported community service hours have you accumulated, for work in the community and for work at vour school?
- 5. Are you involved in any school or community sports programs?
- 6. What are you most proud of? What are you passionate about? What is unique about you? What should we have asked that is important about you?
- 7. What are your career goals and plans?
- 8. What do you think is unique about Goleta?

Your Applications is due no later than Monday, September 23, 2019.

You may mail it to Goleta Teen of the Year, Rotary Club of Goleta Noontime, P.O. Box 164, Goleta, CA 93116 OR you may email it to <u>connieburns12@hotmail.com</u>

OR you may upload it to https://www.goletateen.org

Your application must include the following attachments:

- 1. Completed and signed Parental Release
- 2. Completed and signed Acceptance Agreement
- 3. a recent photograph of yourself (head and shoulders shot only) that can be used in publications.
- 4. a copy of your most recent report card

Please contact Connie Burns at connieburns12@hotmail.com or at 698-1089 with additional questions. If mailing the application, be sure it arrives before September 23, 2019 (firm deadline).

Congratulations, welcome, and thank you for participating. We look forward to learning about you and your community service!



GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM

Sponsored by the Rotary Club of Goleta Noontime

STANDARDS OF CONDUCT

for Teen Participants

Appropriate attire is expected at all functions and when representing Goleta or the Rotary Club of Goleta Noontime. Gentlemen should wear slacks (not jeans) and a clean business shirt with a jacket or sweater to most events (unless otherwise noted). Ladies should wear appropriate-length skirts or dresses (not too short or too revealing) or slacks with a nice blouse, jacket, or sweater. For all events, exposed underwear, bare midriffs and flip flops are NEVER acceptable. If in doubt, opt for the more conservative style of dress.

We expect you to conduct yourself in a manner that you, your parents, Rotary International, and the Goleta Teen of the Year Community Service Award Program Committee would deem appropriate, and of which you can feel proud.

The Goleta Teen of the Year Program Committee and the Rotary Club of Goleta Noontime have the option to disqualify a Teen at any time for any actions that might not uphold the honor of the Goleta Valley, the Goleta Teen of the Year Community Service Award Program, or Rotary International.

GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM

ACCEPTANCE AGREEMENT

NAME:		
ADDRESS:	CITY	ZIP
SCHOOL	GRADE	IN SCHOOL
DATE OF BIRTH:	MALE / FEMALE (circle one)	
CELL PHONE:	HOME PHONE:	
EMAIL:		
the rules and regulations as set by the unless excused, and to conduct mys NOONTIME, and the GOLETA TEEN	N OF THE YEAR COMMUNITY SERVICE AWARD PRO e Goleta Teen of the Year Committee. I further agree to elf in a manner that will be a credit to my family, school OF THE YEAR COMMUNITY SERVICE AWARD PROG eligible for awards. I certify that I live in the zip code are	o attend all required events as listed, ol, the ROTARY CLUB OF GOLETA GRAM. I understand that I must fulfill
DATE	PARTICIPANT'S SIGNATURE	



GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM

Sponsored by the Rotary Club of Goleta Noontime

PARENTAL RELEASE

I/we hereby assign and grant to the GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM, sponsored by the Rotary Club of Goleta Noontime, the right and permission to use and publish the photographs/film/videos/electronic representations and/or sound recordings made during my/our Teen's visit to any GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM event or activity. I hereby release the GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM from any and all liability for such use and promotion. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage and/or distribution of said photographs/films/videos/electronic representations and/or sound recordings without limitation at the discretion of the GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM. I/we specifically waive any right to any compensation I/we may have for the foregoing.

In consideration of my son's/daughter's entry into the GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM, I/we do hereby for ourselves/myself, heirs and administrators, waive and release all claims I/we have against the GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD COMMITTEE, ROTARY CLUB OF GOLETA NOONTIME, ROTARY INTERNATIONAL, and any group or individuals involved in conducting this GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM or its representatives, for any and all injuries that may be suffered by my/our son/daughter in any of the events associated with the GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM or the ROTARY CLUB OF GOLETA NOONTIME.

GOLETA TEEN OF THE YEAR COMMUNITY SERVICE AWARD PROGRAM

Name of Participant:		
·	Print Student's Name	
DATE	SIGNATURE - PARTICIPANT / NOMINEE	PRINT NAME
DATE	SIGNATURE – FATHER/GUARDIAN	PRINT NAME
DATE	SIGNATURE – MOTHER/GUARDIAN	PRINT NAME