



Itawamba Jr. Leadership

Itawamba Jr. Leadership Class of 2019 Application Form

Name: _____
(First) (Preferred name) (Middle) (Last)

School: _____ Date of Birth: _____ Male/Female: _____

Home Address: _____ Parents Name: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ Cell: () _____

Email: _____ Shirt Size(fitted): _____

Grade in **2018/2019** school year: _____

Clubs and Organizations:

Community Service:

Awards/Recognition/Achievements:

Career Interests:

How Can You Help the Itawamba Jr. Leadership Program? What are your strengths?

Why Are You Interested In the Itawamba Jr. Leadership Program?

* Attach a Resume

* Please have two people recommend you for the honor of being selected for the Itawamba Jr. Leadership Program.
(Over)

School Recommendation

Name: _____

Relation to Nominee: _____

Telephone: _____

1. Attendance is extremely important to this organization. In your opinion, how dependable is the nominee? Please rate on the following scale with 1 being least dependable and 5 being the most dependable.

1 2 3 4 5

2. What Are The Positive Qualities Of This Person?

3. How Could This Person Be An Asset to the Itawamba Jr. Leadership Program?

4. Special Comments:

Personal Recommendation

Name: _____

Relation to Nominee: _____

Telephone: _____

1. Attendance is extremely important to this organization. In your opinion, how dependable is the nominee? Please rate on the following scale with 1 being least dependable and 5 being the most dependable.

1 2 3 4 5

2. What Are The Positive Qualities Of This Person?

3. How Could This Person Be An Asset to the Itawamba Jr. Leadership Program?

4. Special Comments: