



### **Martin Youth LEADERSHIP 2023-24 Application Instructions**

**What is Martin Youth LEADERSHIP?** Martin Youth LEADERSHIP is an exciting educational program designed for sophomores, juniors and seniors from local high schools to learn about the diversity and complexities of our community, while developing their leadership skills. This is accomplished through participation in an eight month, structured, experiential program that meets one day each month.

**Our Mission:** The mission of Martin Youth LEADERSHIP is to inform, challenge, and stimulate students to develop the qualities necessary to become the next generation of leaders.

**Program Attendance:** This program takes place during a regular school day and does require students to miss class. The applicant must be able to commit to completing all missed school course work caused by Martin Youth LEADERSHIP absences. Please consider your course load for next year when deciding to apply for this program.

**Schedule and Transportation:** Students will need to have transportation to be dropped off at MCHS between 7-8 am (depending on the session) and picked up at that same location at the end of the session (approx. 1:30-2:00 pm). Sessions are usually held on the 3<sup>rd</sup> Tuesday of the month. We will do our best to accommodate temporary parking of non-MCHS student cars on the MCHS campus.

#### **Contact Information**

- **Chair:** Diana Bruton [Stuartrealtor@gmail.com](mailto:Stuartrealtor@gmail.com) or 772-215-3613
- **Coordinator:** Jeanne Dunn [martinyouthleadership@gmail.com](mailto:martinyouthleadership@gmail.com) or 772-486-4695
- **Teacher Liaisons:**
  - **MCHS:** Brett Hawkins, [hawkinb@martin.org](mailto:hawkinb@martin.org) or 772-341-1734
  - **JBHS:** Marianne Vinette, [vinetm@martin.org](mailto:vinetm@martin.org) or 954-292-1058
  - **SFHS:** Jeanine Bushman, [bushmaj@martin.org](mailto:bushmaj@martin.org) or 772-260-1471
  - **CALC:** Denisha Bonds, [dbonds@irsc.edu](mailto:dbonds@irsc.edu) or 910-494-9599

**Additional information:** The application and additional information can be found on the Martin Youth Leadership homepage (<https://www.stuartmartinchamber.org/the-chamber/leadership>)

## Detailed instructions

### **APPLICATION IS DUE FRIDAY, MAY 19, 2023.**

1. Download the application at [UpdatedMYLApplication](#). The file contains 2 pages of background information and instructions, the 5 page application, and the teacher recommendation form.
2. Applications are PDF fillable and students are encouraged to complete electronically. However, the application may be printed and filled in manually with blue or black ink.
3. Fill out the required information on pages 1-4 of the application.
4. Meet with your guidance counselor and have them verify the school information and initial in the applicable block on page 1
5. Review the application for completeness and accuracy. Initial the attendance requirement section and sign the application. Have your parent or guardian initial in the attendance requirement section and sign the application on page 5.
6. Submit the FULLY completed application (pages 1-5) to your teacher liaison
7. Give the recommendation form to 3 teachers, mentors, employers, etc. Make sure they include the last 4 digits of your school id number on the top of each page and don't include your name on the forms. Completed recommendation forms should be given or emailed to the MYL teacher liaison from your school.
8. Each school's MYL teacher liaison will compile the completed application and recommendation form and email to [martinyouthleadership@gmail.com](mailto:martinyouthleadership@gmail.com). Note it is preferable to provide electronically, but they can be physically delivered to the Stuart Martin Chamber of Commerce, 1650 Kanner Highway, Stuart, Attn: Diana Bruton.
9. Please contact Mrs. Dunn with any questions you may have.



Select your school: CLARK    IHS    JBHS    MCHS    SFHS    TPS
OTHER: _____ Last 4 Digits of School ID _____



**Organizations & Activities**

Please list, in order of importance to you, the activities and/or organizations that you enjoy and/or participate in now (school, volunteer, religious, athletic, or other).

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

**Work Experience**

List any work experience (paid or volunteer), and briefly tell what was/is involved.

Dates	Where	Position	Responsibilities
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have a part-time job? \_\_\_\_\_

How many hours do you work a week? \_\_\_\_\_

Will your hours be flexible to allow time for MYL? \_\_\_\_\_

Select your school: CLARK IHS JBHS MCHS SFHS TPS  
 OTHER: \_\_\_\_\_ Last 4 Digits of School ID \_\_\_\_\_



**MARTIN YOUTH LEADERSHIP**  
**TOMORROW'S LEADERS**

**Please answer each question completely, and as clearly as possible. Applications are evaluated anonymously so please refrain from using your name while answering the following questions.**

1. What 3 adjectives describe you best: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

2. In one sentence, describe what leadership means to you:  
 \_\_\_\_\_

3. Check which one of the following best describes your personality and in less than 3 sentences, describe why:

<input type="checkbox"/> Chameleon <input type="checkbox"/> Lamb <input type="checkbox"/> Lion <input type="checkbox"/> Owl  <b>Why</b>    
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4. What are your educational and career goals and why? Limit response to 2 – 3 sentences.

5. Please check the strengths you can bring to the program and areas you would like to improve by participating in MYL: **Check all categories that apply**

These skills are my current Leadership STRENGTHS:	I hope to IMPROVE these skills by participating in MYL:
<input type="checkbox"/> Communication <input type="checkbox"/> Time / Meeting Management <input type="checkbox"/> Decision Making / Planning / Goal Setting <input type="checkbox"/> Team Building / Group Management / Managing Through Others / Motivation <input type="checkbox"/> Diversity / Culture / Climate <input type="checkbox"/> Character / Values / Ethics <input type="checkbox"/> Specify any others: _____ <input type="checkbox"/> Specify any others: _____ <input type="checkbox"/> Specify any others: _____	<input type="checkbox"/> Communication <input type="checkbox"/> Time / Meeting Management <input type="checkbox"/> Decision Making / Planning / Goal Setting <input type="checkbox"/> Team Building / Group Management / Managing Through Others / Motivation <input type="checkbox"/> Diversity / Culture / Climate <input type="checkbox"/> Character / Values / Ethics <input type="checkbox"/> Specify any others: _____ <input type="checkbox"/> Specify any others: _____ <input type="checkbox"/> Specify any others: _____

Select your school: CLARK IHS JBHS MCHS SFHS TPS  
OTHER: \_\_\_\_\_ Last 4 Digits of School ID \_\_\_\_\_



# MARTIN YOUTH LEADERSHIP

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## TOMORROW'S LEADERS

6. Give an example of how you have demonstrated leadership or have personally experienced leadership. **Limit response to 2 -3 sentences.**

7. Explain why you should be selected to be part of this MYL program. **Limit response to 350 or fewer words.**

8. Add any other information below, if applicable, that the evaluation team should consider when reviewing your application. **Limit response to 350 or fewer words.**



**MARTIN YOUTH LEADERSHIP**  
**TOMORROW'S LEADERS**

Select your school: CLARK IHS JBHS MCHS SFHS TPS  
OTHER: \_\_\_\_\_ Last 4 Digits of School ID \_\_\_\_\_

**Attendance Requirements**  
Each participant is required to attend the Orientation in the beginning of the year with a parent or guardian. Throughout the year, Martin Youth LEADERSHIP encourages 100% attendance, however, one excused absence for illness or family emergency is allowed during the scheduled sessions. At the completion of this program, attendance at Graduation is mandatory.  
Please initial to the right if the attendance requirements are understood and the student will be able to commit to them.

Initial Here  
\_\_\_\_\_  
Student  
\_\_\_\_\_  
Parent

**Transportation:**

Students are responsible for their own transportation to Martin County High School, our pick up and drop off location for each session. Transportation during each session is provided by the Martin County School District and Martin Youth LEADERSHIP. And again, buses will pick up AND drop off students at Martin County High School for each session. There may be sessions when hours are extended and personal transportation is needed.

**Commitment:**

To successfully complete the Martin Youth LEADERSHIP Program and receive a graduation certificate, a participant must attend the Orientation, Graduation, and all sessions. One exception given for ONLY ONE session absence.

**Program Consent:**

I understand that by submitting this application, I am committing to complete the Martin Youth LEADERSHIP program, which includes attending one evening Orientation, nine sessions during one school day a month including Graduation, and any and all necessary tasks assigned to me through Martin Youth LEADERSHIP. I understand that I must actively participate in each session, and that it is an opportunity for me to develop and demonstrate my leadership potential.

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

\_\_\_\_\_  
Signature of Parent/Guardian Date

**Reminder:** Please submit the completed application and recommendation forms to your school’s Martin Youth LEADERSHIP teacher liaison. The applications are evaluated anonymously. Please make sure the “Last 4 digits of School ID number” appears on all pages of the application AND on each of your recommendation forms.

Select your school: CLARK IHS JBHS MCHS SFHS TPS

OTHER: \_\_\_\_\_ Last 4 Digits of School ID \_\_\_\_\_



**MARTIN YOUTH LEADERSHIP**  
**TOMORROW'S LEADERS**

**STUDENT RECOMMENDATION FORM**

**Please ensure you enter the last 4 digits of the student ID#. Refrain from using the student's name on the form. Applications and recommendations are evaluated anonymously, and therefore the student's name needs to be left out.**

1. Recommended by (please print): \_\_\_\_\_

2. How long have you know the aforementioned student? \_\_\_\_\_

3. How do you know the student?  Teacher  Counselor  Other (explain) \_\_\_\_\_

4. Overall Recommendation

On a scale of 1 to 10, (with 1 being poor and 10 being exceptional), please give an overall rate of the student by considering: moral character, dependability, perseverance, self-discipline, personal maturity, completes tasks on times, demonstrates leadership ability or potential, works well with others, willing to explore new ideas, participates in extra-curricular activities and likeliness to succeed in higher education.

5. Please provide any additional comments/considerations you wish to include (optional)

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**Recommendation Signature**

**Date**

Please submit the completed recommendation form to your school's MartinYouth LEADERSHIP teacher liaison.