

Youth Leadership Program Application

Must be registered with the Department of Youth Engagement and Employment Phone: (617) 635-4202 Link: YOUTHLINE@BOSTON.GOV

Name:				
Address:				
City:			Zip code:	
Home phone:		Cell phor	Cell phone:	
E-mail address:			-	
Name of school you attend:			Grade:	
Age:				
What is the best time to cor	ntact you by phone? _			
What is the best phone num	nber to use in order to	o contact you (p	lease check one)?	
☐ Home ☐ Cell				
Will you be able to arrive at Northeastern University)?	the program at 3:30	pm (near the M	useum of Fine Arts and	
Yes No				
Are you able to commit to p	participate in the full	program (Nover	nber-April)	
Yes No				
How did you hear about the	e Youth Leadership P	rogram (please	check the appropriate box below)?	
☐ Teacher ☐ Flier	Crew Leader			
☐ Word of mouth ☐ Web	site			
Friend Other:				
T-Shirt size: Small	Medium Large _	Extra Large [XX Large	
What experience do yo landscape maintenance	-		ail maintenance, horticulture, ide work?	

(continued on other side)

2.	What do you hope to learn/get out of the Youth Leadership Program?
3.	What knowledge, skills, experiences, accomplishments or characteristics do you have that could benefit the program?
4.	What commitments do you have during afterschool time that may create a conflict in attending the program (sports, job, clubs, etc.)?

How do I apply?

Send application and a letter of recommendation to the Emerald Necklace Conservancy, attention Kent Jackson, 125 The Fenway, Boston, MA 02115 or email Kent at <u>kjackson@emeraldnecklace.org</u>. **Spots fill up quickly. Applications are reviewed on a first come first served basis so do not delay. For more information**, contact Kent at 617-522-2700.