

# 2015 Summer Leadership Program

13-15 Years Old

The Summer Leadership Program is an opportunity for young adults to learn to rise above the challenges of today and make a positive impact in their community. A month of inspiring activities and lessons to encourage youth to shatter social boundaries and gain abilities to resolve conflicts. It prepares them for the future by teaching job skills, career development, teamwork, and leadership skills.

Program will be Monday thru Thursday from 8-5.  
Participants will earn \$5.00 per hour.

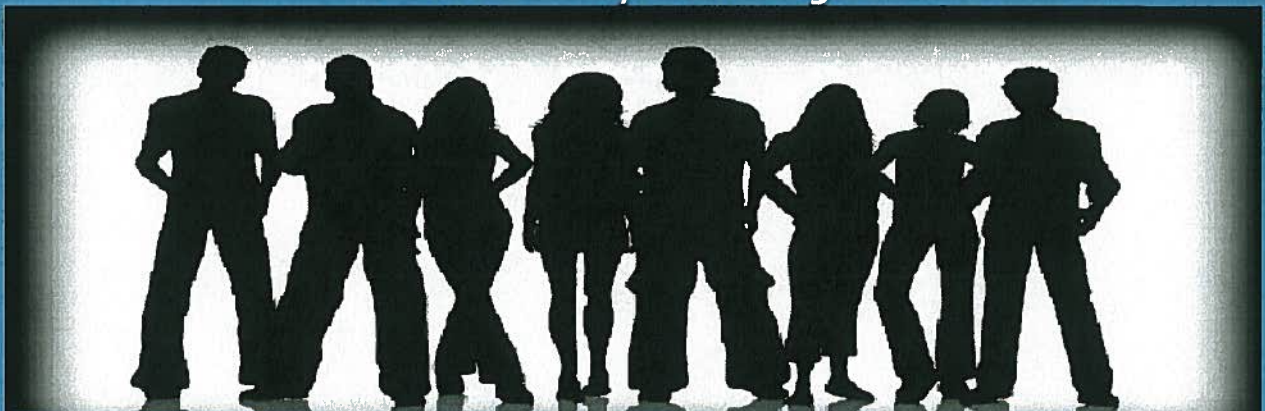
Session 1: June 1 – June 19

Session 2: July 6- July 24

Applications can be obtained from Tribe's website ([www.pci-nsn.gov](http://www.pci-nsn.gov)) or from the Education Department. Applications are due by 5:00 pm May 22<sup>nd</sup>.

All of the following requirements must be met:

- Age 13-15 by June 1, 2015
- Enrolled in 2015-2016 School Year
- Tribal Member, First Generation or reside in a Tribal Member Household
  - Submit a Completed Application by May 22, 2015
  - Successfully Pass Drug Test



For additional information contact Tawana Parham at (251) 253-3456 or [tparham@pci-nsn.gov](mailto:tparham@pci-nsn.gov).



# 2015 Leadership Program 13-15 years old

Applicant Information									
Full Name:							Date:		
Address:									
City:				State:		Zip Code:			
Phone:					Email:				
Date of Birth:			Age:		Social Sec. Number :				
Please indicate your Tribal Affiliation?				Tribal Member Roll #: <input type="checkbox"/>		First Generation (Letter must be submitted) <input type="checkbox"/>		Reside in TM Household (Must submit proof of resident) <input type="checkbox"/>	
Have you participated in this program in the past?				YES <input type="checkbox"/>			NO <input type="checkbox"/>		
Do you have relatives that work for the Tribe? (Includes PCI, CIE, Gaming, Etc.)							YES <input type="checkbox"/>		NO <input type="checkbox"/>
If yes, please list their name and department:									

Education					
Are you currently attending school?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Last Grade Completed:	
Name of School Attending:					
Career areas are you interested in (List at least 3):					

Parent/ Guardian Information				
Parent/ Guardian Name:				
Home Phone:		Cell Phone:		
Please list any information pertaining to your child that we should be aware of such as allergies, etc.				
Does your child have any health problems that should be taken in consideration when placing them in a work situation?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Please provide a signed doctor's statement listing what types of work your child can perform.				

Notification and Signature	
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*All applicants will be drug tested. A positive result excludes participation in this program. This application must be returned to the Poarch Creek Indians Education Department no later than 5:00 pm on May 22, 2015. This program is for students 13-15 years old. Participant must be 13 years of age by June 1, 2015. Applicant must be enrolled in school. If you have any questions, please call Tawana Parham at (251) 253-3456 or Magen Weaver at (251) 368-9136 ext. 2021.*

Participant Signature:		Date:	
Parent/Guardian Signature:		Date:	