

Application Due Date: June 1, 2024

Personal Information				
Name:	1 01001141 11			
Address:				
City:		Zip:		
Mobile Phone:		E-mail Address:		
Date of Birth:	Age:		ex (Male/Female):	
School Attending:	Attending:		Grade:	
Name of Parent(s)/Guardian with whom y	ou reside :			
Parent/Guardian's Mobile Phone:		Parent/Guardian's E-mail Address:		
(A correct & working e-mail a	ddress is II	MPORTANT: M	ost communication takes place	
Org	anizations	and Activities		
Please list up to FIVE (5) school, volunteer, religious, social, ethnic, athletic, etc. organizations or activities with which you have participated during high school, in order of importance to you:				
Organization/Activity:		Year(s):	Position(s) Held:	
1.				
2.				
3.				
4.				
5.				

Short Answer Questions				
Question 1: What is your definition of the word: LEADER?				
Question 2: What career do you plan to pursue? What appe	pale to you about this profession?			
Question 2: What career do you plan to pursue: What appo	ears to you about this profession:			
Question 3: In your opinion, what is good citizenship?				
Question 4: Why do you want to participate in Beaufort Jufrom the experience?	nior Leadership and what do you hope to gain			
from the experience.				
Student and Parent Commitment				
By submitting this application to the program, the applican	t is indicating that he/she and their			
parent(s)/guardian(s) have read the rules and requirements	· ·			
that the student will be required to make up any work that is	•			
understand that the student and a parent must attend the or	2			
attend the opening retreat and at least six of the eight sessio	ns in order to graduate from the program.			
Failure to meet the attendance policy will result in not grade				
fee will not be refunded. We also understand that Beaufort	•			
transportation of students to and from the meeting sites. The	ne program will only be responsible for			
transportation during each session.				
Student Signature	Date			
Parent/ Guardian Signature	Date			
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