

Send completed applications to:

Rae Romberg
130 Seward St. #214
Juneau, AK 99801

Email: rromberg@andvsa.org

Phone: 907 586 6563

Fax: 907 463 4493



Dear LeadOn 2019 Applicants and Mentors,

LeadOn is a three-day conference on **November 15th-17th, 2019** in Anchorage for youth 13 to 17 years old (8th-12th grade) that will cover topics like healthy relationships and healthy sexuality, leadership, and how to create positive community change. The goal of the conference is to have you, our participants, leave feeling empowered and inspired to create community change at home, equipped with skills and experience to do a community project. **EVERY community that is selected to attend LeadOn this year will be awarded a mini-grant to help turn the dreams of this project into a reality.**

Some of you might notice this year's LeadOn application is different! This year we are asking you to apply as a community team, not as individuals. That means your community will have to get together ahead of time and decide which two to four youth you want to go to LeadOn and which mentor you will ask to attend. Instead of applying for the mini-grant to fund your project *after* LeadOn, this application will serve as your application to attend the conference AND to get money to do your project.

In attending LeadOn this year, you are committing to a weekend of fun learning and empowerment AND to working together with your team after the conference to complete a community project.

You don't have to know what your community project is yet! In this application you just need to be able to share some strengths and challenges in your community. You will have time at the conference to brainstorm ideas for your project, get new ideas and learn about how to make a project happen.

Please make sure your application contains the following:

- Youth-led responses- this means youth need to write or share their ideas in every answer
- Complete sentences- at least two to three sentences per question.
- All the questions are answered

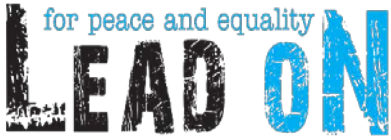
Answers can be submitted the following ways:

- In the application
- On a separate typed piece of paper.
- Record your essay answers in video/audio format and submit them to me.

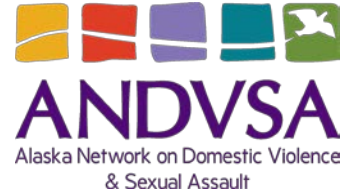
Applications are due by 9/27 for full scholarships. Applications will be accepted on a rolling admission until community spots are filled. We cannot guarantee scholarship funding after 9/27. Applications will be reviewed by other teens. Participants will be selected based on application responses.

**We will host a teleconference to answer any and all questions on: 9/19/19 at 4:30 AK Time.
Call in info: <https://zoom.us/j/931944044/> (669) 900-6833/ Meeting ID: 931 944 044**

Can't wait to see you at LeadOn! ~Rae Romberg



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**Lead On 2019
 Community Team Application**

Community Name: _____

Youth Participants' names:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Adult Mentor's name: _____

Has someone from your community participated in LeadOn before? (check one)
 Yes No Unsure

Please get together with your team and answer the following questions as a group:

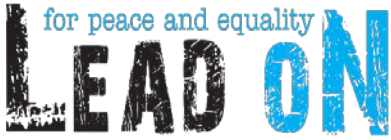
Why does your community team want to participate in LeadOn?

As a team, please identify at least THREE things you LOVE about your community- strengths:

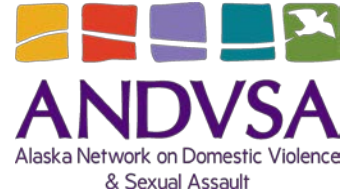
- 1.
- 2.
- 3.

As a team, please identify at least THREE things that you would like to CHANGE- challenges:

- 1.
- 2.
- 3.



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**Lead On 2019
 Community Team Application continued**

What activities would you most like to lead in your community? (i.e. mini-conferences, inspirational speakers, cultural events, after school activities, lock-ins, media campaigns, etc.)

- 1.
- 2.
- 3.

What positive message(s) do you want to share with your community to help it be happier/healthier?

During LeadOn we will be discussing a variety of topics like healthy relationships and healthy sexuality. As a team, please rank the topics below from: 1= most interested 7=least interested.

___ **PUBERTY & YOUTH DEVELOPMENT**- e.g. emotional, social and emotional impacts of adolescence, body image and influence of those around us, decision making relating to sexual health.

___ **IDENTITY**- e.g. gender identity and the difference between sex, sexual orientation, and gender identity. Other identities that affect our lives including race, ethnicity, religion, country of origin, etc.

___ **PREGNANCY AND SEXUALLY TRANSMITTED INFECTION PREVENTION**- e.g. what may impact decisions of whether to or when to engage in sexual behaviors; medically accurate information about pregnancy prevention and about local STI testing and treatment services; common symptoms of and treatments for STIs; skills to communicate with a partner about prevention and testing.

___ **PERSONAL SAFETY**- e.g. situations and behaviors that may be bullying, sexual harassment, sexual abuse, sexual assault, or dating violence; how to get help if you or a friend are in any of these situations.

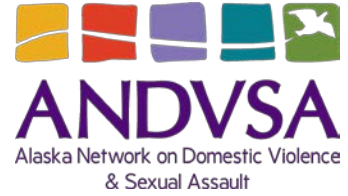
___ **EQUITY, DIVERSITY AND INCLUSION**- e.g. how to address oppression and historical trauma in AK

___ **SELF-ESTEEM, SELF-CARE, AND RESILIENCY**- e.g. how to maintain a positive personal identity and bounce back after challenges; strategies to be able to choose positive coping skills and find wellness

___ **OTHERS NOT LISTED:** _____



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**Lead On 2019 Application
 Youth Participant #1**

Name: _____ Grade: _____

Email: _____ Phone # _____

Preferred way to be in touch? (check one) Phone Call Text Email

Parent/Caregivers Name: _____

Email: _____ Phone # _____

Preferred way to be in touch? (check one) Phone Call Text Email

Have you been to LeadOn before? (check one) Yes No How many times? ____

If yes, did you help complete a community project? (check one) Yes No

If yes, what was your community project about? _____

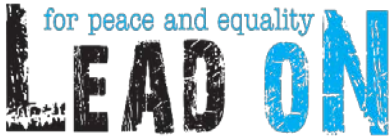
Why do you want to attend LeadOn? (Write two to three complete sentences, please)

If you could tell all the youth in your community one thing to help them be happier/healthier, what would you tell them?

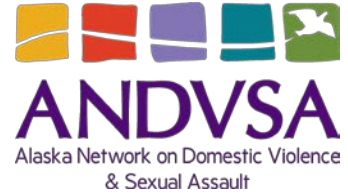
I agree to do all of the following to help complete a community project between Jan. and June 2020:

- Attend regular meetings
- Help to brainstorm ideas
- Help to plan events
- Help to advertise
- Tell my friends about the project
- Help write final report about the project

Signed: _____ Date _____



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**Lead On 2019 Application
 Youth Participant #2**

Name: _____ Grade: _____

Email: _____ Phone # _____

Preferred way to be in touch? (check one) Phone Call Text Email

Parent/Caregivers Name: _____

Email: _____ Phone # _____

Preferred way to be in touch? (check one) Phone Call Text Email

Have you been to LeadOn before? (check one) Yes No How many times? ____

If yes, did you help complete a community project? (check one) Yes No

If yes, what was your community project about? _____

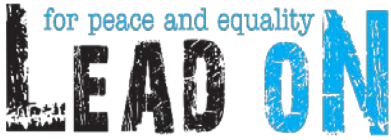
Why do you want to attend LeadOn? (Write two to three complete sentences, please)

If you could tell all the youth in your community one thing to help them be happier/healthier, what would you tell them?

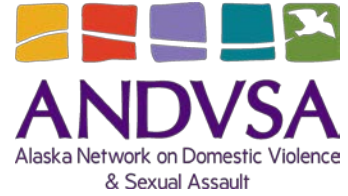
I agree to do all of the following to help complete a community project between Jan. and June 2020:

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- Help to plan events
- Help to advertise
- Tell my friends about the project
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**Lead On 2019 Application
 Youth Participant #3**

Name: _____ Grade: _____

Email: _____ Phone # _____

Preferred way to be in touch? (check one) Phone Call Text Email

Parent/Caregivers Name: _____

Email: _____ Phone # _____

Preferred way to be in touch? (check one) Phone Call Text Email

Have you been to LeadOn before? (check one) Yes No How many times? ____

If yes, did you help complete a community project? (check one) Yes No

If yes, what was your community project about? _____

Why do you want to attend LeadOn? (Write two to three complete sentences, please)

If you could tell all the youth in your community one thing to help them be happier/healthier, what would you tell them?

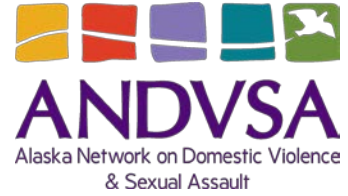
I agree to do all of the following to help complete a community project between Jan. and June 2020:

- Attend regular meetings
- Help to brainstorm ideas
- Help to plan events
- Help to advertise
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Signed: _____ Date _____



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**Lead On 2019 Application
 Youth Participant #4**

Name: _____ Grade: _____

Email: _____ Phone # _____

Preferred way to be in touch? (check one) Phone Call Text Email

Parent/Caregivers Name: _____

Email: _____ Phone # _____

Preferred way to be in touch? (check one) Phone Call Text Email

Have you been to LeadOn before? (check one) Yes No How many times? ____

If yes, did you help complete a community project? (check one) Yes No

If yes, what was your community project about? _____

Why do you want to attend LeadOn? (Write two to three complete sentences, please)

If you could tell all the youth in your community one thing to help them be happier/healthier, what would you tell them?

I agree to do all of the following to help complete a community project between Jan. and June 2020:

- Attend regular meetings
- Help to brainstorm ideas
- Help to plan events
- Help to advertise
- Tell my friends about the project
- Help write final report about the project

Signed: _____ Date _____



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**Lead On 2019 Application
Mentor**

Name: _____

Agency: _____

Email: _____

Phone # _____

Preferred way to be in touch? (check one)

Phone Call

Text

Email

Have you been to LeadOn before? (check one)

Yes

No

How many times? ____

If yes, did you help complete a community project? (circle one)

Yes

No

If yes, what was your community project about? _____

Why do you want to be a mentor for LeadOn?

What do you think are the most challenging issues for youth in your community?

What supports do you need to better help youth in your community? What youth-related topics would you like to learn more about?

I agree to do all of the following to help my team complete a community project between January and June 2020:

- Call/host regular meetings for youth
- Keep in touch with youth on the team
- Access support from ANDVSA as needed
- Build partnerships with other agencies
- Support the participation of new youth
- Participate in a regional web conference
- Facilitate spending of mini-grant funds
- Facilitate the completion of a final report

Signed: _____

Date _____

LeadOn 2019
 November 15th-17th
 Anchorage, AK