



AMPLIFY-NY's **WESTERN REGION** **YOUTH LEADERSHIP FORUM**

July 21 -24, 2018
The Adam's Mark Hotel
Buffalo, New York

YOUTH POWER!'s AMPLIFY-NY Initiative is hosting a Youth Leadership Forum (YLF) for young people with disabilities to speak up, build skills, and prepare to take on leadership roles. This peer-run forum brings opportunities to YOUth and gives the next generation of leaders the tools and support they need for success.

The YLF is a safe, youth friendly environment with plenty of fun activities to compliment the wealth of knowledge being learned! This 4-day, 3-night forum is **FREE** to attend and includes panel presentations, hands-on activities to sharpen leadership and advocacy skills, and supported leadership activities. Future leaders do not want to miss this opportunity to build leadership skills, and become empowered with self-confidence and self-determination.

www.YOUTHPOWERNY.org/AMPLIFYNY

Learn about:

- ★ Disability History & Rights, Culture, Pride, Etiquette, and Self-Awareness
- ★ Self-Determination, Self-Advocacy, Peer and Systems Advocacy
- ★ Leadership & Communication Skills
- ★ Networking & Public Speaking
- ★ Resources to Reach YOUR Goals
- ★ Assistive Technology & Accommodations

Activities:

- ★ Leader's Luncheon
- ★ Adaptive Sports Presentation/Activity
- ★ Fun Evening Activities!
- ★ Develop YOUR Own Leadership Plan

The 411:

- ★ It's a unique opportunity! Have the chance to attend as 1 of 30 young people selected.
- ★ Have fun. This is not your ordinary leadership event!
- ★ Be connected with an experienced advisor to complete a leadership project that interests you.
- ★ This event is **FREE** if accepted. Meals, lodging, and transportation assistance paid for by YP!.

In order to be selected you must:

- ★ Have a developmental/intellectual or other disability.
- ★ Be in the age range of 14-24 (*Youth under 18 must have guardian approval*).
- ★ Live in New York State.
- ★ Show demonstrated leadership potential in your application.
- ★ Complete the application and return it by **June 17, 2018**



Proud member of the
National Association of
Youth Leadership Forums

KEEP THIS PAGE – DO NOT RETURN WITH APPLICATION

Thank you for completing this application. Please use the checklist below to make sure your application packet is complete. Incomplete applications will not be considered.

Required Items	Completed
1. Application Form (3 pages total)	
2. Short answer questions (response to four topics)	
3. Signatures (your own, support person and legal guardian if applicable)	

Applications must be received by June 17, 2018.

Applicants will be notified of selection status no later than June 29, 2018.

Please be advised that participants are required to remain for the duration of the event.

If you have any questions about the YLF, please call Elijah Fagan-Solis at 518-432-0333 ext. 19 or email AMPLIFYNY@YOUTHPOWERNY.ORG

SEND YOUR COMPLETED APPLICATIONS TO:

Email: with subject **Western Region YLF 2018** to AMPLIFYNY@YOUTHPOWERNY.org

Mail: YOUTH POWER! Attn: AMPLIFY-NY
737 Madison Ave
Albany NY 12208

Fax: 518-434-6478

HOW INDIVIDUALS WILL BE SELECTED

Applications received are reviewed by **YOUTH POWER!'s Special Events Planning Group**. Special Events will ensure the group selected represents the diversity of disabilities, gender identities, and ethnicities in each region to the best of their ability.

After being selected, students will be asked to complete a confirmation form and provide additional information to the Amplify-NY Leadership Team. All appropriate expenses will be paid by the Youth Leadership Forum, including lodging, food, and materials.

AMPLIFY-NY's Regional Youth Leadership Forums are brought to you by:

YOUTH POWER!



**Developmental
Disabilities
Planning Council**

AMPLIFY-NY'S

WESTERN REGION YOUTH LEADERSHIP FORUM 2018 Application

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Email: with subject **AMPLIFY-NY Western Region YLF 2018** AMPLIFYNY@YOUTHPOWERNY.org

Mail: **YOUTH POWER!** Attn: AMPLIFY-NY 737 Madison Ave. Albany NY 12208

By **June 17, 2018**

Section I: Information

Name: _____

If you go by a name other than your legal name, list here: _____

Date of Birth: ___/___/___

Pronoun: (He/Him) (She/Her) Neutral (Such as They/Them): _____

E-Mail Address: _____

Permanent Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Phone: () _____ Other Phone: () _____

Best times to contact: Morning Afternoon Evening

Do you have regular access to e-mail? **We will be sending related future communications via email unless otherwise requested.** Yes No, I request _____

Would you want materials in the future to be in alternative formats?

Large Print Text Only Electronic Version None apply

What is your primary language? _____

Other languages you speak fluently? _____

Do you know someone who is also applying that you would be comfortable rooming with?

No Yes (provide name) _____

Do you have any food allergies/dietary restrictions? Will you need an accessible room with roll-in shower? (We will collect in depth medical & accommodations information upon acceptance)?

What youth organizations have you been a part of and in what role? _____

We ask the following questions to make sure that the young people we select are diverse in ethnicity, gender and disabilities. The information will not be shared outside of YP! staff, the selection committee and our grant funders.

What best describes your gender identity? Male Female _____

Which race/ethnic group do you identify with the MOST? (Check one)

Black/African American Asian Native Hawaiian/Pacific Islander European/Caucasian
 Hispanic/Latino Native American/ Alaska Native Other (*specify*): _____

Do you identify as a part of the LGBTQIA+ community? Yes No No, but I'm an Ally

Do you identify as transgender? Yes No

Do you have a disability? Please check all that apply.

Developmental/Intellectual Emotional/Behavioral Health Hearing Learning
 Mobility Visual Other (*specify*): _____

Section II: Short Answer Questions

Please give detailed answers to all of the questions below. **Answers should be at least one paragraph in length and no longer than one double spaced page.** Your answers will be used to judge your ability to participate in the leadership forum. This will help us get to know you better; the more details you give, the better. **Please complete your answers on another sheet of paper and attach it to your application if you are not typing this directly into the document. Important: Answers may be submitted via audio file if necessary.

- 1. Who are you?** – Tell us a little about yourself and share with us an important experience you have had as a young person with a disability.
- 2. Who do you look up to?** – tell us about one or two people who have positively influenced your life and why (Families, teachers, counselors, friends, politicians, or celebrities are appropriate examples)
- 3. What are your goals?** – Describe any of your current plans/goals you are seeking to accomplish (schooling, career goals, independent living, etc.)
- 4. Why do you want to attend?** – tell us why you want to attend this forum and what you hope to get out of it.

Section III: Signatures

This application was completed to the best of my ability. All information about myself is truthful and factual to the best of my knowledge. I completed this application on my own and/or with the assistance of the support person identified below.

Signature of Applicant

Date

Printed name of Support Person, if applicable

Signature of Support Person, if applicable

Date

Youth under 18 will require guardian approval.

I, _____, (Legal Guardian's name) hereby give permission for _____ (Print youth participant's name) to attend AMPLIFY-NY's Western Region Youth Leadership Forum, in Buffalo, New York. I understand that YOUTH POWER! will provide staff and vetted volunteers who will be present during this event and that I will need to coordinate with YOUTH POWER! staff regarding transportation to and from the event.

Legal Guardian Signature

Date

Printed Name

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