



Youth Leadership Program Application
Assemblymember Anthony Rendon
63rd Assembly District

Please print or type

NAME _____
LAST FIRST MIDDLE

ADDRESS _____

CITY/STATE/ZIPCODE _____

HOME PHONE _____ CELL PHONE _____

EMAIL _____

HIGH SCHOOL _____

SOPHOMORE JUNIORS GPA _____
Optional

EMERGENCY CONTACT:

Please print or type

NAME _____
LAST FIRST MIDDLE

EMAIL _____

HOME PHONE _____ CELL PHONE _____

The following four questions are for us to get to know YOU and, in return, helps us better assist you during the program. We look forward to getting to know you along the way, but take this opportunity to share your thoughts, ideas, and plans for the future.
(2 – 3 sentences for each question is required)

1) Name a movie, book, poem, quote, a song, art piece, game, person or anything else that was not mentioned that INSPIRES you and why? (Feel free to add a picture).

2) What role does LEADERSHIP play in your plans for the future?

3) What are some of the CHALLENGES you have faced in your school and community?

4) What do you hope to LEARN/GAIN from the Youth Leadership Program?

5) How motivated are you when working with a group or independent at time?

6) Favorite song and why?
