



Young Heroes

Team Leader 2009-2010

City Year invites you to join with the
YOUNG HEROES,
a fun and challenging service-learning program
just for middle school-aged youth!

As a **YOUNG HEROES TEAM LEADER** you will
lead a group of enthusiastic youth as they:

DO cool service project such as

Painting murals,
Building playgrounds &
Planting community gardens;

MEET new friends & different people

WORK with a team of their peers

MAKE a difference in the community!

If you are up to the **CHALLENGE**, and ready to
make a **COMMITMENT**...

APPLY TODAY!



NATIONAL LEADERSHIP SPONSORS





YOUNG HEROES 2009-2010 TEAM LEADER APPLICATION



YOUNG HEROES

I. About You

Name: _____

Address: _____
(street & apt. #) (city, state, zip)

Home Phone #: _____ Other Phone #: _____

E-mail: _____ T-Shirt Size: _____

Gender: Male Female Birthdate: _____ Age: _____

Ethnicity: (please circle one below) (optional)

African-American/Black

Caucasian/White

Asian American/ Pacific Islander

Hispanic/Latino(a)

American Indian/Alaskan Native

Multiracial/Other

II. About Your Job

Title/Position: _____

Employer's Name: _____

Work Phone #: _____ Supervisor's Name: _____

Work Address: _____
(street & apt. #) (city, state, zip)

III. About Your Education

Name of Last School Attended: _____

City & State of Last School Attended: _____

Are you currently attending this school? _____

Highest Grade Completed/Highest Degree Received: _____



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IV. Short Answer Questions

1) Why do you want to be a Young Heroes Team Leader?

2) Do you have any previous experience working with or leading youth? If so, tell us what you think would make you successful in such a capacity.

3) What other previous experience do you have working or volunteering that might be beneficial to you as a Young Heroes Team Leader?



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YOUNG HEROES

4) Tell us about one person that you view as a leader. What qualities does he or she have that you admire?

5) What challenges do you think you might encounter while working with middle school-aged youth? How would you overcome these challenges?

6) Young Heroes Team Leaders are asked to lead their team approximately two Saturdays a month over the course of five months (January-May). Do you anticipate challenges to your commitment to the program? Why do you feel the commitment of team leaders is important to the Young Heroes program and to the students?

V. Emergency Contact

Name	Relationship	Phone Number(s)
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Name	Relationship	Phone Number(s)
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Please list any relevant medical information, including allergies and medical restrictions.

VI. Reference

Please furnish the names of two references who are not related to you, or your present employer or supervisor.

Name: _____
Phone#: _____ Length of Acquaintance: _____
Relationship: _____

Name: _____
Phone#: _____ Length of Acquaintance: _____
Relationship: _____

VII. Signature

I, the undersigned, certify that the information stated on this application is true, complete and correct to the best of my knowledge and belief and is made in good faith. Any false statements made by me may be used as a basis of rejection for this application.

Printed Name	Signature	Date
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Please send completed application form by **10-30-09** to:

City Year Young Heroes
107 S. High Street, Suite 200
Columbus, OH 43215

Contact Young Heroes Team Leader Rebecca Boylan at **rboylan09@cityyear.org** or **614.209.0778**
OR
Heroes Program Manager Jennifer Fowler at **jfowler@cityyear.org** or **614.586.4522**
for questions.

PLEASE NOTE: There are no employment, education or experience requirements to serve as a Young Heroes Team Leader. Team Leaders must demonstrate enthusiasm, commitment and a willingness and ability to serve. Also, those selected as team leaders (after the interview process) will undergo background checks to assure the safety and protection of the youth with whom we work. City Year is available to all without regard to race, color, national origin, disability, sex, political affiliation, or religion.

