



Instructions: Please type or print clearly! Applications must be fully completed to be considered for selection. To apply to become a YEAH Teen Ambassador, the applicant must be at least 13 years of age at the beginning or during the 2019-2020 school year. If you will be a senior for the school year 2019-2020, you are also eligible to apply.

Application Deadline: 5:00pm AKDT, 7/30/19.

Late and incomplete applications will not be accepted

Section I: Applicant Information

Name: _____
Last First Age Birth Date Gender

Address: _____
Street Address

_____ **AK** _____
City State ZIP Code

Phone: _____ Email _____

Hoodie Size: _____ Grade as of Fall 2019: _____

Organization/Group: _____

How many years in tobacco prevention/control?: _____

Section II: Sponsor Information

Full Name: _____ Organization: _____
Last First

Address: _____
Street Address

_____ **AK** _____
City State ZIP Code

Phone: _____ Birth Date: _____ Email _____



Section III: Application Questions

Show us who you are and what motivates you! Be sure to use specific examples whenever possible. If you need more space, feel free to use a separate sheet of paper or word document.

1. What got you involved in fighting tobacco? What's your story?
2. What specific tobacco related issues are you tackling in your community, school and or/state?
3. What work have you done to influence positive change in your community?
4. What qualities do you have that make you a leader and how have you used those qualities in your anti-tobacco advocacy?
5. If you are selected to be an Ambassador you are required to complete a community project, what are some ideas of tobacco prevention/education projects that you'd like to implement in your community?
6. How do you keep yourself motivated?
7. Do you have allergies or take medication? If yes, please list below.

8. Are you able to perform the essential functions of this position with or without reasonable accommodations?

Reference

All applicants are required to have **one** reference letter with their application. Letters must be submitted by an adult who is familiar with your skills and abilities related to working with peers, can verify your participation in activities, and can describe an experience they have had with you that demonstrates your skills and abilities. Adults to ask for references include: School Administrator, Elder, Teacher, Coach, etc.

It is your responsibility to ensure that a reference is turned in with your application.

Signatures

By signing the bottom of this application and submitting it for consideration, you are agreeing to the following:

- I affirm that the information that I have given on this form is true and correct.*
- If selected to become an ATCA Ambassador, I will meet all expectations listed in the Service Agreement, as well as any expectations that may be asked of me by RurAL CAP staff.*
- RurAL CAP may use photographs, video or audio that may be taken of me.*
- Additional paperwork will be needed immediately if awarded this travel scholarship*
- Sponsors may need to pass a criminal background check.*

Youth Signature

Date

Parent/Guardian Signature

Date

**If emailing application, a typed name and date will be considered electronic signatures*

Email complete applications to Charlie Ess, RurAL CAP, at cess@ruralcap.com or fax to 1-866-389-8484 (Attn: Charlie). He will confirm receiving your application by e-mail.

****Your application will be reviewed by a panel and you and your sponsor will be notified no later than September 1st 2019 ****

