



SECTION IV: APPLICANT & PARENT AGREEMENT

Student Commitment:

If I am selected for this program, I agree that I will:

- not participate in gang activities
- not use any drugs or alcohol
- stay out of trouble at school
- attend school regularly
- apply myself to the best of my academic ability
- ask for tutoring help if I need it with any subject at school
- participate in YLA activities and remain committed for the entire length of the YLA program (7th through 12th grade)
- follow YLA dress code and attendance policy
- follow YLA's Code of Respect, which reads as follows:

We respect ourselves and others and treat each other with common courtesy.

We respect our diversity – in respect to race, gender, ethnicity, religion, physical and mental abilities, class, age and opinion.

We do not tolerate discrimination of any kind in our community.

We take pride in our academic work and contribute actively in the classroom and our learning community.

We are respectful of our environment and take pride in it. We participate in our community through attending and volunteering.

We look out for our fellow cadets both on and off campus.

We trust ourselves and each other to abide by the policies and expectations of the Youth Leadership Academy.

We speak up about important issues because each voice does make a difference.

Student's Signature _____

Date _____



Parent/Legal Guardian Commitment:

Please read each item below and **check or initial next to each statement** to indicate that you understand it and agree to it.

_____ If my/our child is selected for this program, I/we agree that I/we will support my/our child in meeting all of the requirements of the Academy, including staying out of gangs, not consuming drugs or alcohol, and getting the best grades in school. I/we understand that if my/our child does become involved in gangs, drugs, alcohol or any form of illegal activity, my/our child will be dropped from the YLA program.

_____ I/we also understand that I/we will be required to attend a certain number of YLA Parent Meetings each year in order for my/our child to stay in the program.

_____ I/we also understand that the YLA primarily serves youth from low-income families, and thus I/we are **attaching a copy of at least the first two pages of our family's most recent (2021) Federal 1040 form which lists the student applicant as a dependent**. By submitting this form, I/we also are disclosing that I/we do not receive any additional non-reported income.

_____ I/we also understand that I/we must reside in Elgin Community College District 509 to be eligible for this program and its benefits. This geographical area includes Illinois School Districts U-46, D300, D301 and D303. This also means that if I/we move outside of this ECC District 509, we will alert the YLA as soon as possible.

_____ I/we understand that if at any time while my/our child is in the YLA program, my/our child's academic grades fall below minimum standards (2.5 GPA) after two consecutive progress reports, and my/our child does not participate in academic tutoring support programs, my/our child may be dropped from the YLA program.

_____ I/we understand that the YLA has a dress code and thus will ensure that my/our child will be dressed appropriately for each YLA activity.

_____ I/we understand that the YLA has an attendance policy that requires my/our child be present for approximately 20 Saturday mornings (9:00 am – 12:00 pm) as scheduled each year. This means I/we will secure transportation to and from Elgin Community College for my/our child in order that my/our child may participate in YLA.

I/we certify that to the best of my/our knowledge, all of the information in this application form is correct. I/we understand that any falsified information will result in automatic disqualification of the student applicant.

Parent/ Legal Guardian Signature: _____ Date: _____