



YOUTH LEADERSHIP GREGORY-PORTLAND APPLICATION

A program in partnership with GPISD, The Portland Chamber of Commerce & the Leadership
Portland Alumni Association

Applications will be accepted starting May 1, 2024 and must be submitted by: **September 6, 2024**. Class fee of \$100 due to the Portland Chamber by Session 1. Applications may be submitted either by mail or in person to the following locations:

Portland Chamber of Commerce
1211 U.S. 181
P.O. Box 388
Portland, TX 78374

Gregory-Portland High School
Attn: Eileen Harley
4601 Wildcat Dr
Portland, TX 78374

PERSONAL DATA: (Please type or print neatly.)

First Name: _____ Last Name: _____

Preferred name for name badge: _____ Grade: _____

Mailing address: _____

E-Mail: _____ Home Phone: _____ Cell: _____

Biographical Information

On a separate sheet of paper write a brief bio for the class program that will be published.

Essay

Please attach an essay (minimum of 100 words) about what you would like to do for your community in the future as a leader

Reference and Photo

Please include one letter of reference and a good quality photo

Additional Comments: _____

Extra-curricular Activities (in school):

Activities in community:

Highest leadership position held and/or honors received (K-Current) _____

Volunteer experience:

Describe the leadership qualities you believe you possess:

What do you consider your most important achievement so far? _____

What do you consider your greatest strength? _____

What do you consider your weakness? How could you change that into strength? _____

What do you think are the characters of a good leader? _____

What do you hope to gain from your experience in this program? _____

Future Plans _____

LETTER OF COMMITMENT

STUDENT COMMITMENT:

If selected as a participant in the Youth Leadership Portland, I commit to:

- Participate completely in all days of the program dates.
- Arrange my own transportation to and from events, when school bus not provided
- Certify that all information provided in this application is complete and correct. I understand any false information will disqualify me from participation in the program.
- Students must have passing grades and be in good standing with the school.

Student's Printed Name: _____ Date: _____

Student Signature: _____

Student's Email: _____ Student Cell: _____

PARENT COMMITMENT:

As the parent of the applicant, I agree to ensure my child meets all the above listed requirements for participation.

Parent's Printed Name: _____ Date: _____

Parent's Signature: _____

Parent's Email: _____ Parent Cell: _____