

LATINO YOUTH LEADERSHIP CONFERENCE



28th

TWENTY-EIGHTH ANNUAL
LATINO YOUTH LEADERSHIP CONFERENCE

JUNE 22 – JUNE 27
LAS VEGAS, NEVADA

The Latino Youth Leadership Conference brings together Latinx high school students in Nevada for six days of leadership training and development.

The goals of the Latino Youth Leadership Conference are to:

1. Empower youth through leadership, development, and community service.
2. Encourage youth to pursue and complete higher education.
3. Emphasize cultural, community, and family values.

The conference begins on June 22, 2021, and ends on June 27, 2021, at the University of Nevada, Las Vegas. Participation in the LYLC is completely FREE. Accommodations and conference materials are provided at no cost to participants or their families. The LYLC is open to incoming high school juniors through exiting high school seniors, sixteen to eighteen years of age. SPACE IS LIMITED.

Application Deadline: March 31, 2021

Contact Us With Any Recruitment and Application Questions:
lvlylc.recruitment@gmail.com

The Latino Youth Leadership Foundation is consciously and proactively inclusive of all areas of diversity, including but not limited to: race, ethnicity, national origin, gender, sexual orientation, religion, socio-economic status, language, disability, or immigration status.

Parent Engagement Coordinator

Questions:

-Nathalie Martinez: 702-738-2290

DUE March 31st, 2021

Mail Applications to:

Latino Youth Leadership Foundation

P.O. Box 363125

North Las Vegas, NV 89036

APPLY ONLINE:

www.latinoyouthleadership.org



LATINO YOUTH LEADERSHIP CONFERENCE

Student Application | June 22th, 2021 – June 27th, 2021

APPLICANT INFORMATION

NAME (Last, First)		Middle Initial		Sex	
Preferred Name/Nickname (Ex: Christopher --> Chris)					
Gender: Include preferred pronouns if you wish (Ex. He/She/They)					
Address				Apt/Unit #	
City		State		Zip Code	
Home Phone		E-mail			
Cell Phone		Shirt Size		Birthdate	
May we text the provided cell phone number?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
How did you obtain this application? (i.e. friend, teacher, counselor...)					
Will you be able to attend the whole conference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	NOTE: The LYLC starts July 11 at 8:00am and ends July 16 at 7:00pm		
Have you previously attended the LYLC?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, what year:		
Do you plan on continuing your education after high school?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, where:		
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		
Are you interested in Science, Technology, Engineering, or Mathematics?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Are you currently taking any medications? If yes, does it require accommodations? i.e. refrigeration, dietary needs, specific schedule	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please specify:		
Do you know anyone who will be attending the 2021 LYLC?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please specify:		
Do you have allergies or dietary concerns: i.e. vegetarian, vegan, peanut allergy	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please specify:		
Are you disabled, requiring special accommodation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please specify:		

EDUCATION

High School					
When is your expected graduation date?		Current Grade Level			

Student Profile: *If you need more space to write your answers, please feel free to attach additional pages.

LIST THREE STRENGTHS:

1.	
2.	
3.	

WHAT FICTIONAL CHARACTER DESCRIBES WHO YOU ARE AND WHY? MAXIMUM WORD COUNT: 150

LEADERSHIP, WHAT IS IT? MAXIMUM WORD COUNT: 150

DESCRIBE AN EVENT THAT IMPACTED YOUR LIFE? HOW HAS THIS AFFECTED YOU? MAXIMUM WORD COUNT: 250

WHAT ARE YOUR GOALS/ASPIRATIONS? WHAT MOTIVATES YOU TO ACHIEVE THEM? MAXIMUM WORD COUNT: 250

WHAT MAKES YOU ANGRY AND WHY? MAXIMUM WORD COUNT: 150



Emergency Information and Terms of Agreement

Student Application | June 22, 2021 – June 27, 2021



LIABILITY RELEASE FORM

ACTIVITY and/or TRIP: Latino Youth Leadership Conference - June 22, 2021 - June 27, 2021

I, (Parent/Guardian) _____, being the legal guardian of _____ grant my son/daughter permission to reside, attend, and participate in the **2021 Latino Youth Leadership Conference** for its entirety.

1. The **Latino Youth Leadership Alumni/Conference/Foundation** provides a variety of opportunities, which often require local travel, including college tours, low ropes activities, retreats, academic, career and cultural enrichment trips or activities. Trips or activities often involve intense movement, are of long duration, and/or are often intellectually challenging and physically rigorous activities. I understand that such risks simply cannot always be eliminated without jeopardizing the essential qualities of the services and activities.
2. I understand that a violation of one of the following behaviors during the program will result in immediate removal at the cost of the parent/guardian: Drug/alcohol/tobacco use and/or possession, physical and/or verbal harassment, vandalism, arson, and sexual misconduct. Additionally, the program staff reserves the right to remove a participant with reasonable cause.
3. I hereby authorize the program staff to act for my child according to their best judgment in an emergency requiring medical attention. I agree to be responsible for any and all medical or other charges incurred due to an emergency situation involving my child.
4. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless the **Latino Youth Leadership Alumni/Conference/Foundation**, its staff and its affiliates from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of equipment or facilities, including such claims which allege negligent acts or omissions by the program staff. I expressly agree and promise to accept and assume all of the risks related to participating in the **2021 Latino Youth Leadership Conference**. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.
5. Finally, by signing this document, I acknowledge that I may be found by a court of law to have waived my right to maintain a lawsuit against the Latino Youth Leadership Alumni/Conference/Foundation Program, staff and its affiliates.

PARTICIPANT SIGNATURE: _____ **DATE:** _____

PARENT OR GUARDIAN SIGNATURE: _____ **DATE:** _____

Provide the name and phone number of the persons we should notify in case of emergency: Must provide three contacts.

1. Name _____ Relationship _____

Home Phone: _____ Cell: _____

2. Name _____ Relationship _____

Home Phone: _____ Cell: _____

3. Name _____ Relationship _____

Home Phone: _____ Cell: _____

PHOTO MEDIA RELEASE:

I, (Parent/Guardian) _____, being the legal guardian of _____

GRANT the **Latino Youth Leadership Alumni/Conference/Foundation** and persons acting on their behalf or through them the right to use, reproduce, assign and/or distribute photos, films, video and sound recordings of above listed minor for use in materials they may create.

SIGNATURE OF PARENT/LEGAL GUARDIAN: _____ **DATE:** _____