

APPLICATION MATERIALS

What is SCIL?

- ◆ The Sauk County Institute of Leadership is a nine month leadership development program consisting of an initial two (2) day retreat followed by eight (8) one-day workshops and a graduation dinner.
- ◆ SCIL brings together potential leaders from various segments of the community in a program that encourages and prepares participants for assuming leadership roles in their places of employment and in the Sauk County community.
- ◆ The goal of the Institute is to help develop informed, civic-minded leaders who are committed to a vibrant Sauk County.

How will Participants be Selected?

Process

This application is the primary basis for selection. It will be reviewed by a subcommittee of the SCIL Board of Directors. All applicants will be notified of the committee's decision by end of August.

Criteria

The Selection Committee will review applications on the basis of the following criteria:

- L** Local involvement and commitment to the Sauk County community
- E** Evidence of learning
- A** Ability to commit to full participation in the program
- D** Dedicated to the mission of the Institute
- E** Eager to become involved in the community and willing to follow through on that commitment
- R** Recommendations which indicate leadership potential and/or characteristics

SCIL Proposed Class Sessions

*Sessions are typically held the second Thursday of each month
September through May*

Overnight Retreat: Leadership Concepts and Team Building
Local Government and Land Use
Community and Economic Development
Public Safety
Family and Community Issues
Education and Arts
Health Care
Agriculture and Natural Resources
Celebration of Leadership

PLEASE TYPE OR PRINT IN BLACK

Name: _____
First Middle I. Last Preferred first

Home Address: _____

Home telephone: _____ E-mail: _____

High School: _____ Year of Graduation: _____

High School Address: _____
Street address City/State

Mobile Phone: _____ GPA: _____

Guidance Counselor Name:

Guidance Counselor Phone #: _____

List organizations or activities you have been involved with here or in other communities. Please indicate the name of the organization, membership dates, offices held (if any), and a brief description of your involvement.

What was your most significant responsibility, challenge and/or accomplishment during your participation in any listed above?

APPLICANT'S PERSONAL STATEMENT

On a separate sheet of paper, please answer the following questions. Your responses should be typed, if possible, and should not exceed one page of double-spaced type, per question.

1. Why do you want to be a participant in this program? What is your personal goal?
2. What do you believe are the 2-3 most significant issues/challenges facing youth in this County?

INDIVIDUAL COMMITMENT

To graduate from the Sauk County Institute of Leadership, a participant is required to attend an orientation meeting with a UW-Extension representative in late May or early June and attend all sessions – one full weekday each month, September through May.

I understand the purposes of the Sauk County Institute of Leadership program and, if I am selected, I will devote the time and resources necessary to complete the program. I understand that attendance at all monthly sessions is critical to the understanding of the program. All absences must be approved in advance by the SCIL program administrator or Board of Directors. Even though emergencies do arise, I understand any person missing a portion of two or more sessions may be asked to withdraw from the program, with no portion of the tuition to be refunded. Students are responsible for their own transportation to all SCIL classes and functions.

I understand the above commitments and agree to be bound by them in signing this application.

Applicant signature:

Date: _____

TUITION: If accepted into Sauk County Institute Leadership, tuition is \$250 and due by November 1. The tuition amount reflects a \$175 scholarship from the SCIL Board for high school students to participate. Students are encouraged to raise funds for their tuition from their community.

PARENT/GUARDIAN COMMITMENT

The applicant has our full support to participate in the Sauk County Institute of Leadership. I understand the time commitment includes an initial two (2) day overnight retreat followed by eight one full day per month sessions from September though May.

Parent/Guardian signature

SCHOOL COMMITMENT

The applicant has _____ High School's full support to participate in the Sauk County Institute of Leadership. I understand the time commitment includes an initial two (2) day overnight retreat followed by eight one full day per month sessions from September though May.

Principal's Signature

Guidance Counselor's Signature

Expectation Agreement for Sauk County Institute of Leadership (SCIL) Youth Applicants

If selected as a youth participant in SCIL I understand and agree that...

I will:

- Fully participate in all aspects of the SCIL program.
- Provide thoughtful comments and input to discussion topics.
- Work as part of teams, wherever I am assigned, positively and enthusiastically.
- Treat my fellow SCIL participants with respect and dignity and consider us all part of the same team.
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I will NOT:

- Possess or consume alcoholic beverages, tobacco product, or any illegal or unsafe chemical substances.
- Use language that offends other SCIL members, presenters, or others involved in the program.
- Physically leave a program before its conclusion without permission from a SCIL leader.
- Participate in activities which could harm any person mentally, physically, or emotionally.

I understand that if I break any of the expectations listed above that my actions could result in immediate expulsion from the SCIL program.

SCIL Youth Applicant Signature

Parent/Guardian Signature

Date: _____

Date: _____