ORMOND BEACH CHAMBER OF COMMERCE

SHAPING FUTURE LEADERS TODAY

Your annual Youth Leadership Program

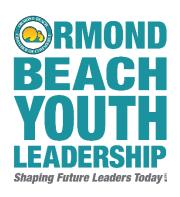
for Ormond Beach area high school students that will empower participants to become future community leaders.

ORMOND BEACH

YOUTH LEADER SHIP PROGRAM!

" Future powered by





A Program of the Ormond Beach Chamber of Commerce

2025 Application Packet

- 1. Program Information
- 2. Program Calendar
- 3. Application Form
- 4. Reference Form
- 5. Latest Report Card

Important – Be sure the application is signed by

Student

Parent

School Official

Empowering participants to become community leaders

Ormond Beach Youth Leadership Program **Ormond Beach Chamber of Commerce** 165 W. Granada Boulevard Ormond Beach, Fl 32174 Phone (386) 677-3454

Email: Ptropea@ormondchamber.com

APPLICANTS

Please review the following information before completing your application form.

CRITERIA AND COMMITMENT

- Students in the Ormond Beach Youth Leadership Program must commit to a high standard of attendance and participation in the program sessions. Please note the dates on the program calendar. Being absent for more than 2 sessions will result in dismissal from the program.
- Please be sure that you DO NOT have any conflicts with the program calendar before applying.

All Sessions are on Wednesdays from 3:00pm to 6:00pm

ELIGIBILITY

- Volusia County Student, Public, Private, or Homeschooling
- The student must be a high school junior, or senior as of August 2025.
- Have a minimum GPA of 3.0 unweighted at the time of application, which must be maintained during the program.
- Demonstrate a high standard of character, behavior, interest and/or leadership skills in extracurricular activities.
- Having an interest in learning about community issues and ways to lend leadership.

APPLICANT CHECKLIST

- Submit your application before August 21, 2025. Applications are online at <u>www.ormondchamber.com</u>, visiting the Ormond Beach Chamber of Commerce during regular business hours, or email <u>ptropea@ormondchamber.com</u>.
- Fill out the application form completely.
- All signatures are required.
- You may email, mail or drop off your completed application to:

Ormond Beach Youth Leadership Program

Ormond Beach Chamber of Commerce

165 W. Granada Blvd Ormond Beach, Fl 32174

Email: Ptropea@ormondchamber.com

ALL APPLICATIONS ARE DUE TO THE CHAMBER OF COMMERCE BY AUGUST 21, 2025

SELECTION PROCESS

- All applications will remain confidential
- The Ormond Beach Youth Leadership Program Selection Team will review the applications and select the finalist
- Program is limited to 20 students
- All applicants will be notified in writing of the Selection Team's decision by August 27, 2024

TUITION

If selected, there is no cost for the overall program. Traveling to and from the program locations is the responsibility of the student.

Schedule is subject to change. Dates will remain the same

Wednesday, September 17, 2025, 3:00 p.m. – 6:00 p.m. Orientation Day – Security First Insurance Company

The first session includes a workshop with leadership development expert Teresa Rand. This session will also encourage class participation, cooperation and learning through group exercises and team building.

Wednesday, October 1, 2025, 3:00 p.m. – 6:00 p.m. Leadership Day – Daytona International Speedway

Students will be exposed to career opportunities. Learn about speedway business operations, as well as Advent Health and NASCAR Partnership.

Wednesday, October 15, 2025, 3:00 p.m. - 6:00 p.m.

City Government - Economic Development - City Commission Chambers

The students will have an opportunity to interact with local elected officials and be exposed to career opportunities.

Wednesday, October 29, 2025, 3:00 p.m. - 6:00 p.m.

Historical Day – Casements / Bus tour

Students will take a guided bus tour to see all the hidden secrets and treasures of Ormond Beach.

Wednesday, November 5, 2025, 3:00 p.m. – 6:00 p.m. Introduction, Health & Wellness Day – Halifax Hospital

Students will learn from health and wellness centers and businesses and learn how to explore an interest in a career in the health field. Students will be exposed to career opportunities in the health care field.

Wednesday, November 12, 2025, 3:00 p.m. – 6:00 p.m. Public Safety Day/ Fire Station # 92

Students will interact and learn from our community public safety leaders and be exposed to career opportunities in that field.

Wednesday, December 3, 2025, 6:00 p.m. – 8:00 p.m. Graduation Dinner - Location TBD

Graduation, Dinner, and Motivational Speaker. Details to come.

DRESS CODE AND TRANSPORTATION

- Students are responsible for their own transportation to and from the assembly point.
- Transportation during each session will be provided (if applicable). The pick-up location is always the same as the drop-off location.
- On program days, planners will be there 15 minutes early, in case you are dropped off.
- Always wear your OBYL shirt, name tag, comfortable walking shoes and nice slacks, business casual. Air-conditioned buildings can get cold, so consider bringing a sweater. Be prepared for rain.
- If you get lost, you can call the Chamber (386) 677-3454 for directions.

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Students	Initials

APPLICATION FORM

All applicants and school officials will be notified in writing of the selection committee's decision. Please return the application to: Ormond Beach Youth Leadership Program. Ormond Beach Chamber of Commerce, 165 W. Granada Blvd. Ormond Beach, Fl 32174 or email to: ptropea@ormondchamber.com

Personal Information	
Name (First)	(Last)
Name for nametag if different	
Your Email Address	
Parent's Email Address	
Home Address	City
Zip Code	
Your Cell Number ()	
Parent / Guardian Name:	
Phone Number ()	-
Parent / Guardian Name:	
Phone Number ()	_

Current Year in School (please circle one) Sophomore Junior Senior
Shirt Size
Food Allergies
Medical conditions, physical limitations, or dietary restrictions (including vegetarian, vegan, or other preferences) of which we should be aware:
RECOGNITIONS List awards, honors or recognitions for school or community related activities you have received over the last two years. (use space below only)
WORK EXPERIENCES List any job experiences, paid or volunteer, and briefly tell what they involved. Do you currently have a part-time job?
ORGANZATONS AND ACTIVITIES Please list in order of importance to you, up to five schools, volunteer, religious, social, athletic or other activities in which you have participated during the last two years. Include any leadership roles.
1
2
3
4

GENERAL INFORMATION

1.	What do you like about yourself?
2.	Who is your hero or heroine?
3.	What qualities do you admire in others?
4.	What are your leisure time activities?
5.	What is your favorite subject in school and why?
6.	Why do you want to participate in Ormond Beach Youth Leadership?
7.	Which session listed on the program calendar interests you most? Why?
8.	How did you find out about the Ormond Beach Youth Leadership Program?

ESSAY TOPIC

"Community Needs and Issues Important to Me"

If you could change anything in your community, what would you do and why? Please respond to the question in 100 words or less using the space provided or on a separate sheet of paper.					

PARENTAL COMMITMENT / CONSENT – Please initial each line and sign at the bottom

APPLICANT NAME
I am the parent/guardian of the above-named student.
I understand the time commitment of the Ormond Beach Youth Leadership Program, and my child will not miss more than two sessions. If my child misses more than two sessions, it could result in the dismissal of her/him from the program.
Ormond Beach Youth Leadership Program/Ormond Beach Chamber of Commerce has my full permission and consent to transport my child by public service bus, private automobile, van or other appropriate means of transportation in connection with all sessions of the program.
I give the Ormond Beach Chamber of Commerce the right to take my photo/video during the program and use as necessary for the Ormond Beach Youth Leadership Program promotional materials, including print, video, social media, online media, etc.
I hereby release and hold harmless Ormond Beach Youth Leadership Program/Ormond Beach Chamber of Commerce, its board, staff, volunteers, members, agents, and employees. from and against any accident, injury, illness or any damage to person or property related directly or indirectly to the above -mentioned student's attendance at, or participation in, any activity or session of the Ormond Beach Youth Leadership Program. I also agree to indemnify and hold harmless the released parties from the released claims, including all related costs, attorney fees, liabilities, settlements, and/or judgements.
Signature of Parent or Legal Guardian
Date
Printed Name of Parent or Legal Guardian
Signature of Applicant
Date

SCHOOL APPROVAL OF GRADES AND CHARACTER

approval from a school official that the student has demonstrated a high standard of character and behavior. The school official must also acknowledge that the student will attend all program sessions of Ormond Beach Youth Leadership Program. Please have your school official (principal, dean or guidance counselor) sign below. The Volusia County School District will allow excused absences from all activities for the program days that fall on school days. I APPROVE THE PARTICIPATION OF _____ IN THE ORMOND BEACH YOURTH LEADERSHIP PROGRAM BASED ON THE ABOVE CRITERIA, SCHOOL ATTENDENCE CREDIT WILL BE GRANTED FOR EACH SESSION ATTENDED. School Official / Representative Please Print Signature of SchoolOfficial/Representative______ School Name_____ STUDENT ATTENDANCE COMMITMENT Full attendance by each participant is essential in the Ormond Beach Youth Leadership Program to meet its objectives. I have read the program calendar dates and if selected I commit to attend each of the program days, the community service hours, and the graduation ceremony. I understand that missing more than 2 sessions may result in dismissal from the program. Signature of Applicant Date

All applicants must have verification of their 3.0 unweighted cumulative grade point average and

MEDICAL INFORMATION

Name of student	
Please Print	
Emergency Contact #1	
Name	
Relationship to student	
Cell Number	_Home Number
Work Number	_
Emergency Contact #2	
Name	
Relationship to student	
Cell Number	_Home Number
Work Number	_
My signature indicates that the information above is trepermission to Ormond Beach Chamber of Commerce volunteers to obtain emergency treatment for my child their control to reach me immediately before any medibe able to reach me and should delay in treatment to be signature gives permission for them to move forward we stable condition until a parent/legal guardian is contact.	Youth Leadership Program staff and diff needed knowing they will do everything in ical treatment takes place. Should they not be detrimental to my child's health, my with medical treatment to keep my child in
Signature of Parent/ Legal Guardian	
Printed Name of Parent or Legal Guardian	
Signature of Student	