



OKLAHOMA DEPARTMENT OF HUMAN SERVICES

A project of the Oklahoma Developmental Disabilities Council

Application for Oklahoma Youth Leadership Forum (YLF), Part I



For office use only

Form 24YL001E: _____ Acknowledged: _____ Interview: _____

- Form 24YL002E, Application for Oklahoma Youth Leadership Forum (YLF)
- Reference letter one
- Reference letter two
- Essay
- Form 24YL004E, Release for Use of Photographs and Quotations
- Form 24YL005E, Strengths, Assets, and Goals Worksheet
- Form 24YL003E, Delegate Information and Request for Accommodations

DEADLINE: Applications must be postmarked by February 1st.

- Type or print with black ink.
- This application is a two-sided document. If you make a copy, make sure to copy both sides of a page.
- Audio and video applications are accepted if all required information is included.
- You may call us to dictate your answers and we will fill out the form for you.

What is leadership and why should you consider YLF?

Leadership is the ability to analyze one’s own strengths and weaknesses, set personal and vocational goals, and have the self-esteem to carry them out. It includes the ability to identify community resources and use them, not only to live independently, but also to establish support networks to participate in community life and affect positive social change. A key part of YLF focuses on learning to appreciate the experience of disability, disability culture, and disability rights. Developing an understanding of these issues is a first step in our own self-awareness and leadership development. YLF focuses on these issues and invites you to be a part.

a. Personal information.

Student's last name		First	Nickname
Date of birth		Sex	Age
Residence street address		City	Zip
Mailing street address, if different		City	Zip
Area code	Home phone number	E-mail address - own <input type="checkbox"/> parent <input type="checkbox"/>	

b. School information.

Name of high school		Present grade or equivalent	
School mailing street address	City	State	Zip
High school counselor's name	Area code	School phone	
High school principal's name	Date graduation expected		

List the school classes in which you are currently enrolled

c. School activities. Briefly list your involvement with your school. This may include any offices you held, club memberships, or after-school activities. List the grade you were in at the time of participation, the name of an adult contact with whom you worked, length of involvement, and what you did.

Activity	Grade level	Adult contact	Dates involved	Type of involvement

d. Ethnicity/disability information:

Race/ethnic background: White Black Hispanic
 Asian Other

Disability (medical diagnosis): _____

Check all that apply:

- Deaf
- Hard of hearing
 - I use sign language.
 - I use real time captioning.
 - I use lip reading.

- Blind
- Visual disability
 - I read with large print.
- Orthopedic disability
 - I use a wheelchair.
 - I cannot walk upstairs. Describe: _____
- Developmental disability
 - Autism
 - Traumatic brain injury
 - Mental retardation
 - Other Describe: _____
- Mental health disability
- Neuro/muscular disability
- Learning disability
- Multiple disabilities
- Other Describe: _____

Thank you for completing this application! Upon receipt in our office, we will send you Form 24YL002E, Application for Oklahoma Youth Leadership Forum (YLF), Part II plus three other forms for your completion. Only complete application packets will be evaluated.

If you have any questions, contact the YLF coordinator at 405-521-4964 or 1-800-836-4470.

Please return this application to:

Oklahoma Developmental Disabilities Council
2401 N.W. 23rd Street, Suite 74
Oklahoma City, OK 73107

or fax to 405-521-4910. Remember this is a two-sided form.