

# LEAD UP Application Summer 2020

Applications can be completed during LEAD UP Summer Academy from Jun 22-26!

Welcome to the LEAD UP Youth Achievement Program Online Application Form! Thank you for your interest in LEAD UP. The LEAD UP (Leadership, Education, Adolescent Development and Unlimited Potential) Youth Achievement Program is for racial/ethnic minority youth who are invited to participate in the program between 9th grade through the first year of college. The program provides leadership and college preparation supports for youth who really want to achieve in life, beginning with their education. To learn more about the Lead UP program visit [myleadup.org](http://myleadup.org)

ALL youth who want to participate in LEAD UP must complete an application form during the event. Time will be allocated to complete application forms during the event on the first day, Jun 22, 2020.

Participation in the program includes the following:

Participation in online weekly communications (e.g., text messages, emails) provided through the LEAD UP Collaboratory ([myleadup.com](http://myleadup.com)) including the Achiever 365 blog and other tools.

Participation in monthly LEAD UP Meet Up sessions hosted with the partnering community or school organization who referred you to the program.

As part of completing the online application, you are required to:

Complete all questions in the online application. When you begin the application you'll need to finish. So, make sure you are ready and have some time before you begin the online application. However, if you are not able to complete the application in one go, please follow instructions below to save and return later to your incomplete application:

1. Ensure that you click on the "Save and Return later" button displayed on each page, when you need to exit.
2. A window will pop up with a code that you can use to resume your application process later. Be sure to copy the code for later use.
3. As soon as click on "Close" in the window that displays the code, you will be directed to a page that requests your email ID.
4. Please enter your email ID to receive a link to resume your incomplete application. It is not the same link that you used to start the application process.
5. You will be able to resume your application when you click on the link sent by email and enter the code that was displayed when you tried to save your work.

Provide well-written responses to the essay questions in the application (make sure you proofread). It is recommended that you review the essay requirements and complete the essay in another document like Word BEFORE you begin the online application. Then, you can copy and paste or attach the essay response into the online application (make sure if you copy and paste you check the formatting in the online application). You will be able to click

time and coaching during LEAD UP to complete the essay.

If you have questions or need additional information contact Dr. Jomella Watson-Thompson at leadup@ku.edu.

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**Application Form:**

1. Please choose one of the following responses that best describes your interest and participation in the LEAD UP program:

- I am a new applicant this year. I am applying to participate in the LU Achievement Program for the first time.
- I am a returning applicant. I have participated in the LU Achievement Program in a prior year and WILL continue participation in LEAD UP on this year.

Are you participating in the ThrYve project in Kansas City, KS?

- Yes
- No

Please select if you're participating in any of the following summer programs (select all that apply):

- ThrYve Project in Kansas City
- Learn to Earn-Historic Northeast-Midtown Association, Kansas City, KS
- Boys and Girls Club, Kansas City, KS
- KCKPD Summer Job Program
- KCKPS Summer School
- KC United Summer STEAM Camp
- KC United Education and Youth Football and Cheer League
- Kids of Campus, Kansas City, Kansas Community College
- Heartland 180
- Police Athletic League
- ReachKCK
- Saturday Academy
- S.N.A.P.B.A.C.K
- Urban Scholastic Center
- Work Force Partnership
- Young Women on the Move
- Other
- Not participating in any other summer programs

Other Programs?

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**Participant ID**

Third letter of your first name

- A
- B
- C
- D
- E
- F
- G
- H
- I
- J
- K
- L
- M
- N
- O
- P
- Q
- R
- S
- T
- U
- V
- W
- X
- Y
- Z

Second letter of your mother's first name

- A
- B
- C
- D
- E
- F
- G
- H
- I
- J
- K
- L
- M
- N
- O
- P
- Q
- R
- S
- T
- U
- V
- W
- X
- Y
- Z

Your middle Initial

- A
- B
- C
- D
- E
- F
- G
- H
- I
- J
- K
- L
- M
- N
- O
- P
- Q
- R
- S
- T
- U
- V
- W
- X
- Y
- Z

Second letter of your last name

- A
- B
- C
- D
- E
- F
- G
- H
- I
- J
- K
- L
- M
- N
- O
- P
- Q
- R
- S
- T
- U
- V
- W
- X
- Y
- Z

First letter of the month you were born

- J
- F
- M
- A
- M
- J
- J
- A
- S
- O
- N
- D

1a. What is your first name?

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1b. What is your last name?

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2. What is your Date of Birth?

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3. What is your age?

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4. Gender:

- Male
- Female
- Other
- Do not wish to answer

5. Race/Ethnicity:

- White
- Hispanic/Latino
- Black or African American
- Native American or American Indian
- Asian/Pacific Islander
- Other

6. What is your current grade-level in school, at the time of completing this application?

- Eighth
- Ninth
- Tenth
- Eleventh
- Twelfth
- Recent High School graduate

Home Mailing Address:

7a. Street Address:

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7b. City:

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7c. State:

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7d. Zip Code:

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8a. Home Phone:

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8b. Cell Phone:

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9. Email address:

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10a. Do you have a social media account? (This information is to help us add your profile to our social media accounts, so you may receive our communication about upcoming activities and events. We will not share this info with others)

- Yes
- No

10b. Do you have a Facebook account?

- Yes
- No

10c. What is your Facebook Username: \_\_\_\_\_

10d. Do you have a Twitter account?  
 Yes  
 No

10e. What is your Twitter Username: \_\_\_\_\_

10f. Do you have an Instagram account?  
 Yes  
 No

10g. What is your Instagram Username: \_\_\_\_\_

10h. Others (please provide username in parenthesis).  
E.g. Pinterest (new\_user) \_\_\_\_\_

School Info:

11. Name of School: \_\_\_\_\_

12a. City: \_\_\_\_\_

12b. State: \_\_\_\_\_

12c. Zip Code: \_\_\_\_\_

Parent/Guardian Info:

13. What is the first and last name(s) of your parent(s) and/or guardian(s)? \_\_\_\_\_

14. What is an email address of a parent/guardian? \_\_\_\_\_

15. Parent(s)/Guardian(s) Cell Phone Number: \_\_\_\_\_

16. Essay for Applicants:

Provide a well-written response to tell us some background information about yourself. Develop an essay on any ONE topic listed below, using appropriate sentences and paragraph structure. You are recommended to type your response first in a Word or another document and then copy and paste it into the online survey. (Note: After you copy and paste it into the online application, check the formatting to ensure the online format looks right.)

Choose any ONE topic below to write an essay:

Background and Influences:

Who in your life has been your biggest influence and why? How has your family background affected the way you see the world? How has your education contributed to who you are today?

Future plans and goals:

Describe your short-term (1-2 years) and long-term (5-10 years) goals and why you want to get a college education?

Current Events and Social Issues:

Explain a societal problem/environmental threat and why it is important to address. Pick a controversial problem and suggest a solution.

Academic Plans:

What is the major/ field of study you are interested in pursuing? Why? And how will it contribute to the society?

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## Essay Questions

Essay Response: Upload your essay as a document.

17. Indicate the overall GPA or both the fall and spring GPA for the school year ending in May 2020. \_\_\_\_\_

18. What are the top three careers that interest you the most? (E.g. Animator, Illustrator, Writer)

Career 1

\_\_\_\_\_  
(If you don't know, write in "Don't know.")

Career 2

\_\_\_\_\_  
(If you don't know, write in "Don't know.")

Career 3

\_\_\_\_\_  
(If you don't know, write in "Don't know.")

19. Do you currently have a resume?

Yes

No

20. Do you have any health concerns that will prevent you from working on a computer for an extended periods of time?

Yes

No

21. If yes, please tell us about any health concerns:

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## Youth Permission Form

This page is required to be completed by any youth interested in participating in the program. It includes required youth group consent sections required by KU, for if you are invited to participate in the program.

22. Photo Release: I give permission to the University of Kansas, the Center for Community Health and Development, and their staff to use photographs, video images, or other likenesses of myself and the attached written statements, for the following purposes:

- Use in education and training activities and materials (including print and on line or electronic instructional materials) by the University and Center for Community Health and Development.
- Use in print or electronic form in public documents, speeches, or talks, brochures (handouts), newsletters/bulletins, by the University or Center for Community Health and Development.
- Use in websites for educational, public relations or promotional purposes which may result in the raising of funds for the Center for Community Health and Development.

I understand that the images and written statements described above may be included in, copied and shared in different forms of print or electronic media. I understand that my name will not be included with the images or statements.

I understand that I can change my mind about giving permission and cancel this authorization at any time so long as the material has not yet been used or shared. If I change my mind about giving permission, in order to cancel this authorization, I must contact the University and the Center for Community Health and Development in writing at the following address:

Center for Community Health and Development  
University of Kansas  
1000 Sunnyside Avenue, 4082 Dole Center  
Lawrence, KS 66045  
785-864-9484  
communityhealth@ku.edu

If I change my mind about giving permission and cancel this authorization after images and statements have been used and shared, I understand that it might not be possible undo actions that have already taken place. If I change my mind about giving permission and cancel this authorization, the University and the Center for Community Health and Development will not use or share my images or statements for new purposes. Whether or not I give my permission for my images and statements to be used and shared, this will not change any treatment, payment, enrollment or eligibility for services or benefits from the University and the Center for Community Health and Development. I understand that the images and statements may also be shared by those who receive and/or view them, and as a result, will no longer be protected by federal privacy rules.

I give my permission knowing that there is no promise of payment for doing so. The photos, video images or other likenesses and the attached statements become the property of the University of Kansas and I release to the University any right, title and/or interest of any kind that I may have in the information or images produced.

I agree

Comments about photo release:

23. Assumption Of Risks: IN CONSIDERATION OF the group allowing me to participate in events, activities, or travel and all related activities associated with the group, including participation in meetings, events, and all activities related to the group (collectively referred to as the "Activities"), I acknowledge that I am aware of the possible Risks, Dangers and Hazards associated with participation in the Activities including the possible risk of severe or fatal injury to myself or others.

Yes, I agree.

24. Release of Liability and Agreement: IN CONSIDERATION OF the group allowing me or my child to participate in the Activities, I agree on behalf of myself and/or my child:

1. TO ASSUME and ACCEPT ALL RISKS arising out of, associated with or related to my or my child's participation in the Activities.
2. TO WAIVE and RELEASE the group and any partnering organizations or institutions (University of Kansas) from any and all liability for any loss, damage, injury or expense that I or my child may suffer, or that my next of kin may suffer as a result of my or my child's participation in the activities due to any cause whatsoever.
3. TO INDEMNIFY and HOLD HARMLESS the group and any partnering organizations or institutions (University of Kansas) from any and all liability for any damage to the personal property of, or personal injury to, any third party resulting from my or my child's participation in the activities.
4. TO INDEMNIFY and HOLD HARMLESS the group and any partnering organizations or institutions (University of Kansas) from any and all claims, demands, actions and costs for any loss, injury, damage or expense whatsoever that might arise out of my or my child's participation in the Activities.

Yes, I agree to statements 1, 2, 3 & 4 stated above.

25. I, the undersigned Participant, voluntarily agree to participate in the Activity and will abide by the rules and expectations for online participation in the activity. I understand that I am responsible to act in a safe and responsible fashion, to follow the instructions or directions of the persons in charge of the Youth Group and/or Activity, and to obey requests to comply with regulations as directed by the persons in charge of the Youth Group, including designated leaders and adult volunteers. I also understand that I may be photographed or appear in video for such purposes as deemed necessary.

Yes, I agree.

26. I UNDERSTAND THAT THIS IS A LEGAL AGREEMENT that is binding upon myself and my heirs, executors, administrators, successors and assigns. I HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT and I ACKNOWLEDGE THAT by completing this agreement voluntarily (selecting the box), I am agreeing to abide by its terms and I am waiving certain legal rights that my child or I may have.

This Consent, Authorization and Acknowledgment shall be effective from the date this form is completed. I also understand by signing my name in the box below I am verifying that I am a youth who is interested in this program and will abide by the terms of this agreement.

Yes, I agree.

27a. Please check this box to confirm and verify you have the permission of your parent(s)/legal guardian(s) to participate in the program.

- Yes  
 No

27b. Enter the name of your parent(s)/guardian(s) who provided permission for you to participate in the program and will complete the Parent/Guardian consent form.

\_\_\_\_\_

27c. Youth Signature:

\_\_\_\_\_

28. Application Checklist: Select all that you have completed.

- I have complete the online application in its entirety.  
 I have completed the essay requirement as a part of the application.

29. What are you looking forward to in LEAD UP this year?

30. Date this consent form was completed by the student:

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