



Dear 2012 YAC Candidate,

Members of the Youth Advisory Council (YAC) are a vital part of the success of the Lindsey Meyer Teen Institute. YACs are individuals who have previously attended LMTI and serve as leaders and role models for current participants. YACs undergo an extensive interview, application, and training process to make them into the TI experts they are. So much of the success of LMTI depends on the youth staff. Each year we select individuals from throughout the state to serve as YACs. Want to apply? Here's what you need to know:

Responsibilities of a YAC include....

- Remaining alcohol, tobacco, and other drug free
- Appreciating and promoting diversity
- Promoting a drug free lifestyle to others
- Leading by example
- Being a role model
- Being a leader
- Developing skits/workshops to be presented at LMTI Summer Leadership Conference
- Assisting with group facilitation (Action Group and Process Group)
- Assisting with cabin chaperoning duties
- Representing your community and Action Group in a proper manner
- Being an active member of your Action Group
- Remaining an active prevention advocate before, during, and after camp
- Attending follow up events
- **Undergoing 5 mandatory training sessions for preparation (including staff training)**
- **Attending all days of LMTI Summer Leadership Conference**

The first step on your way to YAChood is to fill out the attached application completely. Be sure to utilize the provided checklist to insure that you haven't missed any information. Once that's finished, call the LMTI office to set up an interview. We know you are busy, so we have several options available to choose from. Be sure to call early to reserve a slot. Next, you'll come in for an interview; decisions will be made by the beginning of March. It's that simple!

Please note– Not every YAC is the same! New Jersey is diverse and our youth staff reflects that diversity. We look for a mix of individuals who are both “in front of the scenes” and “behind the scenes” individuals. If you enjoyed your experience at LMTI in 2011 and would like to share what you learned with the 2012 group, we hope you will consider applying to be a YAC.

Please contact the LMTI office at (201) 696-0368 if you have any questions. Best of luck!

The LMTI Staff and the YAC Selection Committee

PS– Be sure to check out the following page for a helpful “YAC Application Checklist” to make sure you don't miss a step!

YAC Application Checklist

Before sending in your application, make sure to:

- Include a photograph of yourself.
- Fill out all areas of the application.
- Get parent/guardian initials (3) and signature (1).
- Get student signature (1).
- Get advisor signature (1).
- Answer all application questions on a separate paper and attach to application.
- Recommendation forms
 - Give one form to your advisor, and another to a person of your choosing.
 - Collect both forms from references in sealed envelopes with their signatures over the seal (2 total).
 - Include both forms with completed application package (applications will not be considered if forms are missing).
- Use the correct amount of postage. (Heavier letters sometimes require more postage.)
- Have the correct mailing address:

YAC Selection Committee
Lindsey Meyer Teen Institute
19 Franklin Place, Suite 103
Rutherford, NJ 07070
- Mail or drop off application. If you are mailing your application, it must be postmarked by TUESDAY, JANUARY 31st, 2012. If you are dropping off, application must be delivered to our office in Rutherford by 5 p.m. on TUESDAY, JANUARY 31st, 2012.

After sending in your application, make sure to:

- Call the LMTI office set up an interview date and time by FRIDAY FEBRUARY 3RD, 2012 AT 5PM.

Interview Dates:

Saturday,	February 11th	1pm-5pm	Tamblyn Field Civic Center, Rutherford
Monday,	February 20th	10am-2pm	Tamblyn Field Civic Center, Rutherford
Wednesday,	February 15th	3pm-5pm	Woodstown High School Library, Woodstown
Saturday,	February 25th	1pm-5pm	Tamblyn Field Civic Center, Rutherford

Directions to Tamblyn Field Civic Center 30 Woodland Avenue, Rutherford, NJ 07070

From NJ Turnpike: Exit 16W to Route 3 East. Follow directions below from Route 3 East.

From Garden State Parkway: Exit 153A to Route 3 East. Follow directions below from Route 3 East.

From Route 3 East: Park Avenue Exit. At Stop sign, make a Left Turn to Traffic Light; Make another Left Turn onto Park Avenue. Go straight on Park Avenue approximately 3 blocks to Woodland Avenue. Turn Right onto Woodland. Center is on right side of street.

From Route 3 West: Riverside Avenue Exit. At Stop sign, make a Left Turn. Go underneath Route 3 and make a quick Left Turn. Go one block to traffic light. Make Left Turn at Traffic Light onto Park Avenue. Go straight on Park Avenue approximately 3 blocks to Woodland Avenue. Turn Right onto Woodland. Center is on right side of street.

From Route 17 N & S: Exit at Union Ave, Rutherford exit. Make Right, go to the Stop Sign and make Left. Go under train trestle and make right at stop sign. Proceed to circle and Go 1/2 way around to get onto Park Ave. (stores on both sides) Continue up Park Avenue through 2 lights. 2nd block on left make Left (Woodland Ave.) Civic Center & Field on the right.

Directions to Woodstown High School 140 East Avenue, Woodstown, NJ 08098

From NJ Turnpike & Route 45 South: Exit 2 for US-322/Swedeseboro. Turn right at Swedeseboro Road/US-322 East. Turn right onto Tomlin Station Road/County Road 607. After 3.8 miles, turn right at NJ 45 South. After 5 miles, turn left at East Ave, Woodstown High School will be on your right.

US-40 East: Start out on US-40 East. Turn left at West Ave/ NJ-45 North/US-40 East. West Ave becomes East Ave. Woodstown High School will be on your right.



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2012 Youth Advisory Council (YAC) Application

*This application must be postmarked or dropped off by Tuesday, January 31, 2012.
Call (201) 696-0368 no later than 5pm on Friday, February 3, 2012 to set up an interview.*

NOTE: *If you are a graduating senior, disregard this application and visit www.lmteeninstitute.org for a College Track Application.*

I am a:	<input type="checkbox"/> New Applicant	<input type="checkbox"/> Returning Applicant	I was a YAC last year:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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1. Personal Information

First Name:		Last Name:			
Street Address:					
City:		State:		Zip Code:	
Home Phone:			Cell Phone:		
Facebook:			Email Address:		
Age:	Date of Birth:	Sex:	Grade (please circle): Freshman Sophomore Junior		
Advisor's Name:			Action Group:		

2. Essay Questions

Please answer the following questions on a separate piece of paper. Please print legibly or type your answers and attach them to the rest of your application.

1. What prevention activities have you helped to plan or present since attending the 2011 LMTI Summer Leadership Conference? Describe each activity and the role you played.
2. What is your history with alcohol, tobacco, and other drug use? Please explain. Also, do you currently use any of the aforementioned?
3. What does being alcohol, tobacco, and drug-free mean to you?
4. Has the LMTI experience influenced your knowledge, attitudes, behaviors, and decisions? If so, please explain.
5. In your opinion, what makes someone a good leader?
6. Why do you want to become a YAC? Why should LMTI select you to be a YAC?
7. Besides being involved in LMTI, what other activities do you participate in during your spare time? (Clubs, Sports, Hobbies, etc...)
8. Before LMTI considers you to become a YAC, is there anything else you would like us tell us?

IF YOU ARE A RETURNING YAC, PLEASE ANSWER THESE QUESTIONS AS WELL. IF YOU ARE NOT A RETURNING YAC, SKIP THESE QUESTIONS:

9. How was your experience as a YAC different than your experience as a participant?
10. What was the most rewarding part of being a YAC at the 2011 Summer Leadership Conference?

3. Conference and Training Information & Attendance Policy

<p>The following is a list of YAC Training dates:</p> <ol style="list-style-type: none"> 1. Saturday, April 14, 2012 2. Saturday, May 19, 2012 3. Fri-Sat, June 15-16, 2012 4. Saturday, July 14, 2012 5. Saturday, August 11, 2012 <p>Conference Dates: Sunday, August 19, 2012 – Friday August 24, 2012</p>	<p style="text-align: center;">TRAINING ATTENDANCE POLICY</p> <p>Attendance at each of these trainings is <i>critically</i> important to the success of the YACs. We expect that every effort will be made to attend <i>all</i> trainings. However, we do understand that conflicts may arise and therefore will allow all YACs one (1) excused absence. Beyond that, any additional absences will be reviewed by the LMTI staff on a case by case basis. Upon acceptance, YACs will be notified of the procedure they must follow regarding reporting an absence to the LMTI staff.</p>
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4. YAC Training Fee Schedule & Refund Policy

<p>YAC Training Fee</p> <p>The YAC Training fee is \$375.00. Each YAC's fee covers their five days of training, including one overnight. The stay at camp for the LMTI Summer Leadership Conference is provided by LMTI. The YAC Training fee is due no later than Saturday, May 19th the second YAC training date. If accepted as a YAC, you will receive a funding form to fill out for billing purposes. Please check with your advisor now so you know who will be paying your fee (i.e. your parents, school, or municipal alliance).</p>	<p>Refund Policy</p> <ol style="list-style-type: none"> 1. A full refund will be given if a student drops out of, or is required to leave the YAC program before the first training. 2. A partial refund of \$150.00 will be given if the student drops out of, or is required to leave the YAC program up until the overnight training. 3. No refund will be given if a student drops out of, or is required to leave the YAC program after the overnight training.
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5. Advisor Acknowledgement

<p>I understand that _____ has applied to be a YAC for the 2012 LMTI Summer Leadership Conference, have made sure the student is truly available for all trainings and is aware of the deadlines and do, hereby, support this person's continued involvement in the LMTI Program. I am aware of the current YAC Training Attendance Policy and I also understand the Fee Schedule and Refund Policy.</p> <p>By signing below, I signify that I am aware of this student's application to become a YAC and understand that I may be contacted regarding this applicant.</p>	
<p>Advisor Signature:</p>	<p>Date:</p>

6. Parent/Guardian Initials & Signature

<p>I understand that, due to the number of YAC applicants LMTI receives each year, less than half of the outstanding young people who apply can be accepted. I further understand that by applying, my child (whether as a new or returning YAC) may receive a rejection form letter from the LMTI program. I agree to support both my child and the LMTI program in whatever decision is made by the selection committee. I understand that it is the policy of LMTI that individual reasons for any applicant's rejection are not personally discussed with the student, parent, or advisor.</p>	<p>PLEASE INITIAL:</p>
<p>I understand the LMTI policy regarding training attendance and that my child is responsible for attending the listed trainings. Additional missed trainings may result in my child's dismissal from the YAC program.</p>	<p>PLEASE INITIAL:</p>
<p>I understand the fee schedule and refund policy.</p>	<p>PLEASE INITIAL:</p>
<p>Parent/Guardian Name (please print):</p>	<p>Relationship:</p>
<p>Parent/Guardian Signature:</p>	<p>Date:</p>

7. Student Signature

<p>I understand that if accepted I am required to fulfill all YAC responsibilities and duties. That includes attending all pre-conference trainings, including Staff Training immediately preceding LMTI Summer Leadership Conference. Also, I must be present for the entire conference and may not arrive late or leave early. All of the answers on this application are based upon my own experiences and opinions.</p>	
<p>Student Signature:</p>	<p>Date:</p>



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2012 YAC Application

ADVISOR RECOMMENDATION FORM

Instructions: Thank you for taking the time to fill out this form. Please complete form entirely and sign at the bottom of this sheet. Upon completion, place completed form into a **sealed envelope, put your signature over the seal and return to applicant** for inclusion in his/her application packet. Call (201) 696-0368 if you have any questions. Thank you!

Applicant's Name:	
Advisor's Name:	
Daytime Phone Number:	E-mail Address:

For each of the following characteristics, please rate the applicant according to your experiences.

	Average or Below Average	Good	Excellent	Outstanding	One of the Top Few I've Encountered In My Career
A. Leadership Ability/Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Listening Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Positive Attitude/Enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Ability to Express Him/Herself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Ability to Take Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Ability to Work with Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Involvement and Commitment to Action Group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Respect Towards Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments (Please continue on back or attach another sheet or letter if desired):

Signature

I certify that I have filled out this form based up my personal experiences with the applicant and understand that I may be contacted by the YAC Selection Committee to further discuss my impressions of this candidate.

Signature:	Date:
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2012 YAC Application

GENERAL RECOMMENDATION FORM

Instructions: Thank you for taking the time to fill out this form. Please complete form entirely and sign at the bottom of this sheet. Upon completion, place completed form into a **sealed envelope, put your signature over the seal and return to applicant** for inclusion in his/her application packet. Call (201) 696-0368 if you have any questions. Thank you!

Applicant's Name:			
Your Name:		Affiliation/Organization:	
Address:		City:	State:
Daytime Phone:		Relationship to Applicant:	

For each of the following characteristics, please rate the applicant according to your experiences.

	Average or Below Average	Good	Excellent	Outstanding	One of the Top Few I've Encountered In My Career
A. Leadership Ability/Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Listening Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Positive Attitude/Enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Ability to Express Him/Herself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Ability to Take Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Ability to Work with Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Involvement and Commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Respect Towards Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments (Please continue on back or attach another sheet or letter if desired):

Signature

I certify that I have filled out this form based up my personal experiences with the applicant and understand that I may be contacted by the YAC Selection Committee to further discuss my impressions of this candidate.

Signature:	Date:
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