

# United States Senate Youth Program Application Form 2022-2023

## Student Information:

Legal Name:

\_\_\_\_\_

First M. I. Last

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Home Address: \_\_\_\_\_

Street City Zip Code

Home Phone: ( ) Cell Phone: ( )

Email: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Cell Phone: ( )

Email: \_\_\_\_\_

Additional:

Parent/Guardian Name: \_\_\_\_\_ Cell Phone: ( )

Email: \_\_\_\_\_

## School Information:

High School: \_\_\_\_\_

School Address: \_\_\_\_\_

Street City Zip Code

Name of Principal: \_\_\_\_\_ Phone: ( )

Email: \_\_\_\_\_

Name of School Contact: \_\_\_\_\_ Phone: ( )

Email: \_\_\_\_\_

## Qualifications *(Feel free to attach additional pages to complete this section):*

School Leadership Position for 2022-2023: \_\_\_\_\_

Current Grade Level (Junior or Senior): \_\_\_\_\_

Why do you want to represent Hawaii in the United States Senate Youth Program?

Describe your current role serving as a leader in your school and in your community.

**Leadership Positions:**

List all elected or appointed positions held in high school.

| Leadership Positions | Grade 9 | Grade 10 | Grade 11 | Grade 12 | Activity/Organization |
|----------------------|---------|----------|----------|----------|-----------------------|
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**Community Activities:**

List community activities that you have participated in and note any major accomplishments.

| Community Activities | Date(s) of Service | Major Accomplishments |
|----------------------|--------------------|-----------------------|
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**Recognition and Awards:**

List major accomplishments and/or recognition, honors and awards you have received.

| Recognition or Award | Grade 9 | Grade 10 | Grade 11 | Grade 12 | Activity/Organization |
|----------------------|---------|----------|----------|----------|-----------------------|
|                      |         |          |          |          |                       |
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I certify that the information on this application is correct. I am a high school junior or senior in a student leadership position and a legal permanent resident or citizen of the United States. If selected, I will provide proof of vaccination status should Washington Week be held in person.

\_\_\_\_\_  
Applicant's Signature Date

I affirm that all of the above is correct to the best of my knowledge. I give permission for my student to participate and if selected will be allowed to attend Washington Week.

\_\_\_\_\_  
Principal's Signature Date

**Deadline: Friday, October 7, 2022**

Send application, academic transcripts and one letter of recommendation by:  
Mail to: OCID - Student Activities Program, 475 22nd Avenue, Room 207, Honolulu, HI 96816  
or Email: [tiffany.frias@k12.hi.us](mailto:tiffany.frias@k12.hi.us)