



## Enlightened Initiative (EI), Junior Staff Application – Summer 2015

### **Introduction**

Each year, the Enlightened Initiative Board of Directors look for junior staff members who are willing to help serve immigrant youth from low-income households in our annual Leadership Summer Camp held in Washington, D.C. From the results seen in the past four years, the Board of Directors knows that the Leadership Summer Camp is making a significant positive difference in the lives of immigrant youth, and hopes to have people like you joining us in making a difference for the youth!

### **Who can apply?**

We look for passionate and dedicated EI youth alumni, who are 16 years old or older, and who are willing to spend their time and energy in the summer serving the immigrant youth community.

### **What are requirements?**

1. Junior staff members need to contribute at least \$250.00 to support a leadership camp participant. The EI Board of Directors will look for other funding to provide for the junior staff stay with lodging and food during the dates of the Leadership Summer Camp. Junior staff members are responsible to cover their own cost of transportation to get to the camp and to leave to go home as well as transportation during the camp dates.
2. Junior staff members are expected to be totally committed to spending their time at the summer leadership camp. Other outside internship/employment activities while serving the immigrant youth in the summer leadership camp is not allow for junior staff members.
3. If the junior staff member is younger than 18 years of age consent from the parents or guardians is required.
4. Junior staff member must posses medical insurance and a GPA of minimum 2.80 pts.



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### **JUNIOR STAFF DEMOGRAPHICS AND INFORMATION:** (Please print)

Name of applicant: \_\_\_\_\_

Date of birth \_\_\_\_\_ Date Attended EI Summer Camp Previously: \_\_\_\_\_

Gender: \_\_\_\_\_ High School/College: \_\_\_\_\_

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

Home Phone #: \_\_\_\_\_ Cell phone Number: \_\_\_\_\_

In case of emergency contact: \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_ Insurance ID: \_\_\_\_\_

### **Choose two of the followings essay questions to answer:**

1. Describe why you would like to apply for the position of Junior Staff to EI Summer Camp 2015. (Under 300 words)
2. Describe any previous leadership experience that may be helpful with your application. (Under 300 words)
3. Describe any personality traits (up to three characteristics) that you think would be helpful to this position. (Under 300 words)
4. Describe your previous experiences with EI leadership camp. (Under 300 words)



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### **Conclusion:**

Please send the completed essays and application to [enlightenedinitiative2011@gmail.com](mailto:enlightenedinitiative2011@gmail.com), with copy to [cghuynh72@hotmail.com](mailto:cghuynh72@hotmail.com). Write in the subject of the email **EI Junior Staff Application 2015**.

Or send by postal mail at:

**Enlightened Initiative  
6204 Old Valley Court  
Alexandria, VA 22310**

If you have any questions please contact us by phone at **202-492-7194**.

Attached also send a recent photo of you, a copy of the last semester academic transcript, a photo copy of your health insurance and the health information and parental permission and medical release forms that you will find in the next pages. The EI Board Members will be reviewing all the applications received. Please give the EI Board Members one month after the receipt of your essays and documents to have an update of your application.

Thank you for your interest in becoming a Junior Staff Member for the Enlightened Initiative!



## Enlightened Initiative (EI), Junior Staff Application – Summer 2015

### PARENTAL/GUARDIAN PERMISSION AND MEDICAL RELEASE

I, \_\_\_\_\_ give permission for my child/youth

*(Parent/Guardian name)*

\_\_\_\_\_ to participate as a Junior Staff

*(Participant's Name)*

in the Enlightened Initiative (EI) Leadership Summer Camp. This authorization shall cover the EI Camp and travel to and from, and any other travel taken during the days of the leadership camp. I absolve/release Enlightened Initiative, its Board Members, Officers and staff, from all liability pertaining to accidents during travel to and from the activities, health related illnesses and other medical conditions that may occur during the Enlightened Initiative leadership training camp. I agree to provide all health and medical information to those conducting the leadership training camp.

My signature authorizes to the adult leaders/trainers supervising this leadership training camp to administer emergency treatment to my child/youth for any accident or illness and to act in my stead in approving necessary medical care.

I understand and agree that my child/youth is electing to participate at his/her own risk. I am not aware of any physical or medical condition that would interfere with my child's ability to participate.

Parent or guardian's name (print letters) \_\_\_\_\_

Parent or guardian's name signature: \_\_\_\_\_

Date: \_\_\_\_\_



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**Medical Information:** Please attach copy of Medical Insurance card to the back of this sheet

### Insurance and Physician Information

Insurance Company: \_\_\_\_\_

Policy/Group Number: \_\_\_\_\_

Physician Name: \_\_\_\_\_

Physician Phone Number: \_\_\_\_\_

### If there has been any history of the following, please check:

Frequent Headaches (  ) Diabetes (  ) Asthma, Hay Fever (  ) Hives (  ) Convulsions (  )

Unconsciousness (  ) Chronic cough (  ) Unconsciousness (  ) Trouble with eyes (  ) Ulcers (  )

Shortness of breath (  ) Bedwetting (  ) Fainting (  ) Heart trouble (  ) Ear Infection (  )  
ADD/ADHD (  )

Seizures (  ) Other (  ) Comments on checked item (include diet limitations):

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Does your son/daughter have any allergies? Please list.

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All medications should be labeled and brought to the Leadership Camp in Washington, DC with the participant!

Please list any medication to be taken by the participant while at the EI Leadership camp.

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Is there any reason your son/daughter cannot participate fully in any physical activity?

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### Parental/Guardian Rights and Responsibilities and Consent to Participate in Survey Activities

#### *Video/Photographs/Visuals*

I understand that my child/youth may be photographed or videotaped during the course of the Enlightened Initiative leadership training camp. I grant full and unlimited permission to the Enlightened Initiative and its agents and affiliates to use my child's name, photographs or any other record of participation in this leadership training camp in any broadcast, telecast or other account of the leadership training camp for publicity purposes, without compensation, by placing my initials here. \_\_\_\_\_

#### *Inspection of Instructional Materials*

You have the right to inspect any instructional materials used as part of the Enlightened Initiative educational curriculum. You may direct your request to inspect instructional materials to any of the Enlightened Initiative board members.

Information obtained about the participants during and after the Enlightened Initiative camp activities will be kept confidential to the extent allowed by law.

Your signature below permits that we used the information collected before, during and after the Enlightened Initiative camp for future research to assist in grant opportunities, scholarships and furthering the initiative in providing an alternative response to intervention for immigrant youth from low-income households.

Parent or guardian's name (print letters) \_\_\_\_\_

Parent or guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_