Youth Ending Slavery YES Chapter Official Application

| Name of Applicant (Chapter Leade | r): | |
|--|--|--|
| | | ess: |
| Personal Address: | | |
| Personal Address: | State: | Zip Code: |
| Current Grade: | _ | |
| | | |
| School/Group: | | <u> </u> |
| School/Group Address: | | |
| City: | State: | Zip Code: |
| School/Group Phone Number: | | _ |
| the chapter leader. This number ca chapter grows. Leadership structur desire. However, the name listed a to the YES Board of Directors. | nn certainly be hi e within the cha | Indicate the desired that there are four other members besides igher initially and should increase as your poter can also be shifted to fit your group's lader above will serve as the primary contact |
| Other Chapter Members: 1 | | Signature |
| | | Email |
| 2 | | Signature |
| | | Email |
| 3 | | Signature |
| | | Email |
| 4 | | Signature |
| | | Email |

There are several ways to begin your YES Chapter, such as creating it in conjunction with another similarly-focused and pre-existing club, starting it from scratch at your school, or utilizing another student-led group as a launching pad for a YES Chapter. Regardless of how you choose to start your chapter, the YES Board of Directors will remain in contact and in support of the work you do as an extension of this non-profit. Please clarify your plan below.

| Will your chapter be affiliated with your school | J | No | ased club? | 103 | NO |
|---|--|--------------------------------|-----------------------------|--------------------|-------|
| Will your chapter be affiliated with another you lf yes, what group? | | Yes | No | | |
| Youth Ending Slavery is an entirely youth-led expects chapters to also be entirely youth-led importance and value of having an adult ment who can easily step back and let the students | However, the | e YES Boa erve as a r | ard also und esource who | erstand en need | s the |
| Do you have an adult contact who could serve space, offer advice rather than instruction, etc | • | al resource | e? i.e. provid | e meeti | ing |
| | | | | | |
| Contact Name: | Signature:_ | | | | |
| Contact Name:F | | | | | |
| | Phone Numbe ekly or once e within your cha | er: very two v apter and | veeks to ens | sure act | ive |
| As a chapter, it is important that you meet wee participation, effort, and communication both w | Phone Numbe ekly or once e within your cha | er: very two v apter and | veeks to ens | sure act | ive |

Please answer the following short-answer questions in complete sentences:

1. Why do you want to be a part of YES?

| 2. | What other activities are you involved in and how would they connect with YES? |
|----|--|
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| | |
| 3. | If you are selected to become a chapter, what would be your first event? |
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