



## MVYLI 2014-2015 Application

1. Name \_\_\_\_\_
2. Address \_\_\_\_\_
3. Email \_\_\_\_\_ Phone home \_\_\_\_\_ cell \_\_\_\_\_
4. Birth date and school year \_\_\_\_\_
5. My dream for my life is:  
\_\_\_\_\_
6. My dream for my island is:  
\_\_\_\_\_
7. My dream for the world is:  
\_\_\_\_\_
8. My academic goals for school are:  
\_\_\_\_\_
9. My professional goals are:  
\_\_\_\_\_
10. My travel goals are: \_\_\_\_\_
12. What are the major challenges facing young people on my island:  
\_\_\_\_\_
13. Community service projects I have been involved with:  
\_\_\_\_\_
14. Why I want to be a youth delegate to the Youth Leadership Summit 2014  
and a member of the Martha's Vineyard Youth Leadership Initiative  
\_\_\_\_\_  
\_\_\_\_\_

### 15. MVYLI: Opportunities = Responsibilities

- I want to be a member of MVYLI's year-round program so I can make my dreams come true; share my dream and action plans with leaders to build a sustainable island.
- I will be on time for meetings and communicate any changes to my schedule.
- I will help champion community service projects on my island.
- I understand that with this opportunity, there are responsibilities. I will respectfully represent youth from my island;
- I agree to the Institute's no drugs, alcohol and smoking policy during all aspects of MVYLI's programs.

Please use this form to submit your typed answers and send them to [mvyouthleaders@gmail.com](mailto:mvyouthleaders@gmail.com) **Thanks!**

Youth signature \_\_\_\_\_ Date \_\_\_\_\_  
Parent signature \_\_\_\_\_ Phone/Email \_\_\_\_\_  
School leader signature \_\_\_\_\_ Email \_\_\_\_\_

Please email your typed application to MVYLI • [mvyouthleades@gmail.com](mailto:mvyouthleades@gmail.com) • [www.mvyli.org](http://www.mvyli.org)