

YLT CLASS 19 PARENT PERMISSION FORM

Applicant Name _____ School _____

**** Print this form, have a parent/ guardian review and sign it and turn in to your school's YLT contact by 3/7/22**

The High School YLT Contacts for 2022-2023 are:

Chiles: Brian Welch	Godby: Jan Anderson	Maclay: Heather Bas
Community Christian: Mara Eller	JP II: Sara Bayliss	NFC: Jim Lieser
FAMU DRS: Kay Wallace	Leon: Kelly Folmar	Rickards: Aretha McNeil
Florida High: Ryan Capas	Lincoln: Callie Kitchens	SAIL: Marlow Matherne

**** If you attend Leon County Virtual School, are homeschooled or attend any other school not listed above, please turn this form in to the YLT Office **Contact (contact info below).****

YLT Class 19 Scheduled Program Days (Excused Absences from School): **** All dates are mandatory to complete this program**

➤ Tuesday, September 13, 2022	➤ Tuesday, January 24, 2023
➤ Tuesday, October 11, 2022	➤ Tuesday, February 28, 2023
➤ Thursday, November 3, 2022	➤ Tuesday, March 28, 2023 **make up day if needed
➤ Tuesday, December 6, 2022	➤ Tuesday, April 18, 2023

**** Class Orientation: Thursday, May 12, 2022, Opening retreat: Friday - Saturday, July 15 & 16, 2022 (overnight) and Class Graduation: Sunday, May 7, 2023**

MISSION: *To foster a personal vision and a lifelong commitment to leadership and community service among Tallahassee youth.*

PARENT/ GUARDIAN COMMITMENT

This application has the approval of this parent/ guardian and the applicant has my full support, which includes the time required to participate in the program.

We have reviewed the schedule of events for the program year (above) and do not have any conflicts. In addition, I understand that if my child is selected for the program, **our obligation is a non-refundable \$250 participation fee, scholarships and payment plans are available.** Payment plans and Scholarships are available by request.

Please reach out to the YLT Program Director (contact below) if you wish to inquire about more information about the participation fee, payment plan, or scholarship funds. **This program will ensure the participation fee is not a barrier for accepted students.**

Signature of Parent/ Guardian Date

Printed Name of Parent/ Guardian Relationship to Applicant