

SITE APPLICATION

**** SUBMIT NO LATER THAN SEPTEMBER 1 ****

SITE INFORMATION

Name of Apartment Community: _____

Street Address: _____

City, State, Zip: _____

Name of Site Manager: _____

Phone #: _____ Fax: _____ Email: _____

YRP COORDINATOR CONTACT INFORMATION

Name of YRP Coordinator: _____ Title/Position: _____

Phone #: _____ Fax: _____ Email: _____

COMMITMENT VERIFICATION – *for YRP Coordinator*

I, as a representative of the above-named apartment community, have read and understand the “Youth Recognition Program Guidelines” and my responsibilities therein. I understand that, as YRP Coordinator, I am responsible for recruiting resident participants and mentors; collecting and maintaining all program paperwork; and planning and implementing the kick-off, fundraising, and community service events. I am committed to the implementation and administration of the Youth Recognition Program.

Signature of Youth Recognition Program Coordinator *Date*

YOUTH RESIDENT ROSTER – *please use additional page, if necessary*

	Name of Participant – <i>Please Print</i>	Name of Guardian – <i>Please Print</i>
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YOUTH RECOGNITION PROGRAM



	Name of Participant – <i>Please Print</i>	Name of Guardian – <i>Please Print</i>
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MENTOR ROSTER – *please use additional page, if necessary*

	Name of Mentor – <i>Please Print</i>	
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SITE APPROVAL – *for property/site manager*

By signing below, I support my site’s participation in the Youth Recognition Program. I agree to oversee the implementation of the program in accordance with the Youth Recognition Program Guidelines.

Signature of Property/Site Manager

Date

**** ATTACH COMPLETED MENTOR AND STUDENT APPLICATIONS TO THIS DOCUMENT ****