



Teen Ventures' Leadership & Advisory Board (LAB)
 Fall 2017 – Spring 2018 Semesters

Applicant's FIRST NAME	LAST NAME	DOB	Age	Gender
Address		City/State/Zip		Phone
				Email
PARENT/GUARDIAN		PARENT/GUARDIAN		
Name _____		Name _____		
Primary Phone # (____)_____		Primary Phone # (____)_____		
Email _____		Email _____		
SCHOOL				
Name _____ City _____ State _____				

YEP/Teen Ventures Courses You've Completed – check any that apply	√
YEP After School & Year-Round Adventures	
YEP Summer Climbing Courses	
TV Winter Hut Trip	
TV Spring Break Trip	
TV Outdoor Leadership Summit (TVOLS)	
TV Backcountry Trekking	
TV Multisport Road Trip	
Other: _____	

How did you learn about Teen Ventures' LAB? check any that apply	√
CMC Publication	
YEP Email Newsletter	
Friend/Family	
CMC Website	
Outreach Event/Fundraiser	
Other: _____	

Applicant Q & A:

Please type answers and attach to this application.

1. Please provide a brief introduction to *who you are*.
2. What interests you about YEP Teen Ventures' Leadership & Advisory Board (TVLAB)?
3. What contribution do you hope to bring to the TVLAB?
4. What characteristics do you identify with being a **leader**? How does that apply to being a TVLAB member?

SUPPORTING ROLES/AREAS OF INTEREST – Please check all that apply:

- | | |
|--|--|
| <ul style="list-style-type: none"> <input type="radio"/> Outdoor Skills Training <input type="radio"/> Course & Trip Planning <input type="radio"/> Conservation & Stewardship <input type="radio"/> Community Outreach & Engagement | <ul style="list-style-type: none"> <input type="radio"/> Marketing & Social Media Support <input type="radio"/> Youth Mentorship <input type="radio"/> Other: _____ |
|--|--|

Please provide TWO personal or professional references:

REFERENCE #1	REFERENCE #2
Name _____	Name _____
Primary Phone # (____)_____	Primary Phone # (____)_____
Email _____	Email _____

An important aspect of TVLAB is youth mentorship: we'll share our knowledge, skills, & experience with elementary/middle school students. A background check is required of all CMC volunteers who work with youth. We'll help you with this process if selected as a TVLAB member.

Have you ever been convicted of a crime? NO YES

Board Member Requirements & Expectations:

Attend **3 out of 4** TVLAB meetings, per semester:

- | | |
|---------------------------|--------------------------|
| • TVLAB Fall Meeting #1 | September 26, 6:00-8:00p |
| • TVLAB Fall Meeting #2 | October 11, 6:00-8:00p |
| • TVLAB Fall Meeting #3 | November 7, 6:00-8:00p |
| • TVLAB Fall Meeting #4 | December 4, 6:00-8:00p |
| • TVLAB Spring Meeting #1 | January 9, 6:00-8:00p |
| • TVLAB Spring Meeting #2 | February 12, 6:00-8:00p |
| • TVLAB Spring Meeting #3 | March 6, 6:00-8:00p |
| • TVLAB Spring Meeting #4 | April 17, 6:00-8:00p |

Participate in **1** Teen Ventures course or trip, per term of service:

- | | |
|--|----------------|
| • TV Wilderness First Aid Course (WFA Basic) | November 4-5 |
| • TV Winter Hut Trip | February 17-19 |
| • TV Spring Break Trip – Moab | March 26-30 |
| • TV Spring Climbing Skills Day | April 22 |
| • TVLAB member designed trips | TBD |

Volunteer at **1** CMC event or stewardship project, per term of service:

- | | |
|---|------------|
| • CMC presents: Radical Reels Film Fest – TV Volunteer Night | October 5 |
| • CMC Backcountry Bash | October 21 |
| • CMC presents: Banff Mountain Film World Tour – TV Volunteer Night | March 3 |
| • CMC Mountainfest | March 24 |
| • CMC trail stewardship projects | Spring TBD |

Volunteer for at least **1** youth mentorship opportunity through CMC, per term of service:

- | | |
|---|---|
| • Afterschool climbing with Boys & Girls Club of Metro Denver | Fall & Spring. Too many sessions to list! |
| • TV Volunteer Opportunity – National Get Outdoors Day | June 10 |
| • CMC Youth Summer Camps | June, July, August |

These are the minimum requirements to participate as a LAB member. If you have concerns about meeting the minimum please talk to Doug. We realize that you are talented people and have busy lives. Remember: the more you put in to the program, the more you will gain from it!

TO THE APPLICANT: By completing this application, I have applied to serve on the Teen Ventures' Leadership & Advisory Board, in conjunction with the Colorado Mountain Club's Youth Education Program (YEP). I have reviewed and understand the expectations of becoming a member of the TV Leadership & Advisory Board. The information I have provided is accurate to the best of my ability. I understand that the contents of this application will be kept confidential. I grant permission to the Colorado Mountain Club to check and verify references.

TO THE PARENT/GUARDIAN: I understand that this submission indicates that my teenager has applied to serve on YEP Teen Ventures' Leadership & Advisory Board. All teen candidates must complete the entire application and interview process, in order to be considered for selection. This application does not guarantee placement. Parents will receive notification by email regarding their candidate's application status. By signing this, I understand the expectations and requirements of my teen's participation on this board. If admitted to the LAB, there is a \$35 registration fee.

Signature of Applicant:

Date:

Signature of Parent/Guardian:

Please submit completed applications to:



YEP Teen Ventures

dougmaiworm@cmc.org | p. 303.996.2741

710 10th Street, Suite 200

Golden, CO 80401

cmc.org/teenventures

A Passion for the Mountains

Application Timeline

- Applications DUE – **September 15, 2017**
- Selections made – September 22, 2017

Office Use: Application fee received _____
Date Interviewed _____