



## APPLICATION FOR VIRTUAL YOUTH HEALTH LEADERSHIP

Youth Health Leadership (YHL) is a signature program of Childhood Obesity Prevention Education (COPE), formerly funded by the Florida Blue Foundation. The purpose of YHL is to engage youth in promoting and improving health and wellness through education and action in Tallahassee/Leon County. Those selected for YHL will participate in interactive educational sessions about improving health for themselves and others. Upon completion, YHL members will use the knowledge and skills learned to help improve health of their peers, families and the broader community. YHL is a unique opportunity for youth to increase knowledge about health and wellness, develop public speaking skills, and enhance leadership abilities while helping to improve the health of Tallahassee/Leon County.

We now have successfully completed eight cohorts of YHL. Since 2013, 72 youth have completed all requirements and have led to the development of several youth-led health campaigns, including:

- established the YHL Facebook Page
- developed a partnership with CHAMPIONS which provides fitness activities for elementary and middle school students
- promoted physical activity through development of a unique flyer
- identified mental health as a key issue for COPE to explore
- successfully implemented a program to promote universal health with underserved youth
- successfully implemented a program to promote health with homeless families
- successfully implemented a health program at the Frenchtown Heritage Market
- successfully implemented a health program at the Walker-Ford Community Center
- successfully collaborated with the Youth Empowerment & Entrepreneurship Program
- successfully collaborated with Capital City Youth Services to implement a COVID-19 prevention program for homeless youth

**We will continue with our new features this year, including training on health justice, adding a requirement for youth to plan an individual project, and collaborating with local organizations for a culminating community project.**

We are now recruiting YHL Cohort IX members who, once selected, will have the opportunity to complete requirements in 2021. **All YHL activities in 2021 will be via Zoom.** New recruits will be selected through a competitive process. To be considered for YHL, the enclosed application should be completed and returned via email or fax to Dr. Penny Ralston **no later than 5:00 pm on Monday, January 18, 2021.** A review committee comprised of YHL alumni, parents, and advisors will interview qualified candidates and make selections. Criteria for selection for YHL include:

- Be high school age (between the ages of 14 and 18)
- Be an active member of a community organization (e.g. school, civic, fraternal, voluntary, faith-based)
- Have an interest in health
- Have an interest in being a youth health leader
- Commitment to attend Virtual YHL events in spring 2021

As a part of the process, youth being considered for YHL will be asked to participate in interviews via Zoom during the week of **January 25-29, 2021.** A parent/guardian will be asked

to attend the interviews as well. Selected youth and their parents will be notified in writing by the week of **February 1, 2021**. The YHL Induction Ceremony will then be held on **Tuesday, February 16, 2021 via Zoom**. More details about the time and location of the event will be provided once youth are selected. The proposed YHL Cohort 2021 Calendar of activities is listed on the next page.

We are requesting that the family of each selected YHL member provide a \$50.00 fee to help defray expenses for Cohort IX, including facilities, refreshments and materials. Checks should be made payable to Florida State University Center on Better Health & Life. Funds need to be received prior to the Induction Ceremony. Scholarships are available for families needing assistance with the fee.

For more information about YHL, please go to <https://bhlcenter.fsu.edu/youth-health-leadership>. For more information about the YHL application process, please contact Penny Ralston, Ph.D., Professor, Dean Emeritus & Director, FSU Center on Better Health and Life for Underserved Populations, (850) 841-0407 (Phone), (850) 893-4360 (Fax), [pralston@fsu.edu](mailto:pralston@fsu.edu).

### **YHL Cohort IX 2020-2021 Calendar**

<b>Recruitment Period</b>	<b>November 2020</b>
<b>Application Rollout</b>	<b>November/December 2020</b>
<b>Application Acceptance Period</b>	<b>January 4-18, 2021</b>
<b>Review of Applications</b>	<b>January 19-22, 2021</b>
<b>Interviews</b>	<b>January 25-29, 2021</b>
<b>Notification for Selections</b>	<b>February 1, 2021</b>
<b>Virtual Induction Ceremony</b>	<b>February 16, 2021</b>
<b>Phase I: Virtual Sessions</b>	<b>February 18, February 23, February 25, March 2, 2021</b>
<b>Phase II: Virtual Application Rotation</b>	<b>March 8-19, 2021</b>
<b>Phase III: Virtual Collaborative Project Planning &amp; Implementation</b>	<b>March 23, March 25, March 30, April 1 (event possibly on April 3), 2021</b>
<b>Virtual Recognition Ceremony</b>	<b>April 6, 2021</b>
<b>Virtual Focus Group</b>	<b>April 20, 2021</b>

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**Directions:** Please complete the following application and submit by 5:00 pm on January 18, 2021. (No applications will be accepted after this date.) Applications should be submitted to Dr. Penny Ralston ([pralston@fsu.edu](mailto:pralston@fsu.edu)) (850) 893-4360 fax. Please attach additional pages if you need more space.

## Background

Name: \_\_\_\_\_ Telephone Number: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Local Address: \_\_\_\_\_

School you currently attend: \_\_\_\_\_

What grade are you in? \_\_\_\_\_ How old are you? \_\_\_\_\_

## Career Goals

What job/employment would you like to have in the future?

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## Extracurricular Activities

What activities are you involved in with your organization? Include any leadership activities such as serving on committees or holding offices.

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List other extracurricular activities:

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List your interests and hobbies:

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## Interest in YHL

Briefly describe your specific interest in becoming a part of YHL:

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## YOUTH HEALTH LEADERSHIP PARENTAL AND ADVISOR PERMISSION FORM

### Parent/Guardian

**I approve my child's involvement in Youth Health Leadership. I understand that I will be invited and encouraged to attend all YHL educational sessions and other events.**

Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please scan/email or fax completed application to Dr. Penny Ralston, [pralston@fsu.edu](mailto:pralston@fsu.edu) or (850) 893-4360 fax.

### For Organization Use Only

**This section will be completed by an organization representative (e.g. teacher, advisor or adult leader) before the application is submitted.**

### Organization Representative

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Do you support this applicant's participation in Youth Health Leadership?