

# **FBI NATIONAL ACADEMY ASSOCIATES**

## **2020 Youth Leadership Program**

### **Candidate Information**

The FBI National Academy Associates, Inc. (FBINAA), an organization comprised of law enforcement professionals who are graduates of the FBI National Academy, Quantico, Virginia, is offering to qualified Students (AGES 14 –16) who have demonstrated above average academic standards (3.0 or higher on a 4.0 scale), as well as good citizenship, the opportunity to participate in an eight day program of leadership development at the FBI Academy.

This exciting program is offered through the cooperation of the FBI, and individual participants are selected and sponsored by the various state chapters of the FBINAA, who will pay transportation and student sponsorship fees. This year, participants will also be included from our sister organizations, including LEEDA, NEIA, and the Society of Former Special Agents of the FBI. Further, the counselors and instructional staff for the program consist of National Academy graduates who are members of the FBINAA and select FBI Special Agent personnel. Guest lecturers in various professional disciplines also address the students.

Although the program is not limited to young persons interested in a future career in law enforcement, interested candidates should possess a desire to gain knowledge of the American system of criminal justice, as well as ethics, leadership skills and personal development.

This year's session of the Youth Leadership Program begins **June 18, 2020** with arrival at Reagan National Airport in Washington, D.C., and will conclude on **June 26, 2020** with departure from Reagan National Airport in Washington, D.C.

The program is open to males and females. Qualified candidates are encouraged to complete the application, including the necessary signatures, and to submit the forms to the designated FBINAA Chapter Youth Leadership Program Representative by the due date of **FEBRUARY 14, 2020**. The Chapter must make selection and submission of all required material to the FBINAA Executive Office by **APRIL 13, 2020**.

Application forms are available thru the FBINAA Chapter Youth Leadership Program Contacts.

# **FBI NATIONAL ACADEMY ASSOCIATES**

## **Youth Leadership Program**

### **APPLICATION FORM**

*In the tradition of the FBI National Academy, the mission of the FBINAA Youth Leadership Program is to provide a foundation in ethical & moral leadership that encourages our students to further develop the knowledge, skills and abilities necessary to accept the challenge of leadership as a way of life.*

The FBI National Academy Associates' annual Youth Leadership Program is an intense eight-day program of classroom study, physical challenges, guest lectures and leadership experiences. The program focus is on leadership, ethics and personal development.

The YLP is limited to 60 students ages 14-16 from the United States and around the world. The selection process is therefore highly competitive. Any interested student must submit their application to the local Chapter of the FBI National Academy Associates in which they reside. The local Chapters will review the applications and supporting materials, conduct applicant interviews, and select and submit to the FBINAA the applications of the candidate(s) that the Chapter will sponsor. The FBI National Academy Associates will verify the qualifications of the selected candidates and provide them with additional information to prepare for the YLP program.

Applicants must complete all elements of the following pages and sign the application certifying the information. A parent or legal guardian must also sign the application to verify the applicant information, including physical limitations, allergies and required medications, and their consent for the applicant to attend and fully participate in the YLP program.

The application must be submitted to the sponsoring FBI National Academy Associates Chapter by the deadline prescribed by the Chapter to ensure the selection process is completed and applications submitted to the FBINAA by the posted deadline. The FBI National Academy Associates can make no exceptions to the deadlines. The applicant(s) selected by the sponsoring Chapter will be required to submit a medical form, completed by a licensed physician, prior to the FBI National Academy Associates posted deadline.

Read the application carefully and complete it fully. Any questions about the application or the application process should be referred to either the YLP Committee Chair or President of the sponsoring Chapter.

The application is scored as follows:

- Maximum 20 points - Applicant's Grade Point Average
- Maximum 40 points - Applicant Interview
- Maximum 10 points - Applicant Essay
- Maximum 10 points - Applicant's Community Involvement and Volunteering
- Maximum 10 points - Extra Curricular School Activities
- Maximum 10 points - Relationship to an *active* member of the FBI NAA

# FBI NATIONAL ACADEMY ASSOCIATES

## Youth Leadership Program

### 2020 APPLICATION

#### APPLICANT

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex:  Male  Female

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

eMail: \_\_\_\_\_

School: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

#### PARENT(S) OR LEGAL GUARDIAN(s)

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

eMail: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

eMail: \_\_\_\_\_

#### RELATIONSHIP TO AN ACTIVE MEMBER OF THE FBINAA

Name of Relation: \_\_\_\_\_ Relationship: \_\_\_\_\_

FBINAA Member Number: \_\_\_\_\_ Session #: \_\_\_\_\_ Chapter: \_\_\_\_\_

**LIST COMMUNITY YOUR INVOLVEMENT / VOLUNTEERING ACTIVITIES:** *NOT SCHOOL RELATED OR REQUIRED ACTIVITIES. These activities include participation in community service organizations, scouting, etc.; volunteer service through individual, community or faith based activities; and other community involvement.*

- 1.) \_\_\_\_\_
- 2.) \_\_\_\_\_
- 3.) \_\_\_\_\_
- 4.) \_\_\_\_\_
- 5.) \_\_\_\_\_

Use additional sheets if needed

**LIST YOUR EXTRA-CURRICULAR ACTIVITIES:** *These include school sponsored organizations and activities (e.g.: choral, debate teams, year book or newspaper, science or computer clubs, etc.) and organized athletics (school or club affiliated.)*

- 1.) \_\_\_\_\_
- 2.) \_\_\_\_\_
- 3.) \_\_\_\_\_
- 4.) \_\_\_\_\_
- 5.) \_\_\_\_\_

Use additional sheets if needed

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**REQUIRED ATTACHMENTS AT TIME OF SUBMISSION TO SPONSORING CHAPTER:**

\_\_\_\_\_ High School Transcript with current Grade Point Average (If home schooled, GPA form as required by home state)

\_\_\_\_\_ Current Photograph to assist in identification at Reagan National Airport

\_\_\_\_\_ Essay

**PHYSICAL LIMITATIONS AND DIETARY RESTRICTIONS**

List any physical limitations, medical conditions, known allergies, dietary restrictions that the applicant currently has, or required medications, which the YLP Staff must be aware of:

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*A Medical Release Form (YLP Form 04) will be required after selection by sponsoring chapter, but prior to final acceptance to the program.*

**PARENTAL CONSENT**

I UNDERSTAND MY SON/DAUGHTER WILL BE ATTENDING THE FBINAA YOUTH LEADERSHIP PROGRAM AND EXCEPT WHILE TRAVELING ON A COMMERCIAL AIRLINE OR CONVEYANCE, WILL BE UNDER THE CONSTANT SUPERVISION OF A MEMBER OF THE FBINAA, Inc. WITH THIS UNDERSTANDING I APPROVE OF HIS/HER PARTICIPATION IN THIS PROGRAM.

I FURTHER CERTIFY THAT HE/SHE IS MEDICALLY AND PHYSICALLY FIT TO FULLY PARTICIPATE IN ALL PROGRAM REQUIREMENTS.

I UNDERSTAND THAT SHOULD MY SON/DAUGHTER LEAVE THE PROGRAM PRIOR TO COMPLETION I AM RESPONSIBLE FOR COSTS INCURRED BY THE SPONSORING FBINAA CHAPTER AT THEIR DISCRETION.

Parent /Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

**TO BE COMPLETED BY THE SPONSORING FBINAA, Inc. CHAPTER**

FBINAA Chapter: \_\_\_\_\_

President: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

# **FBI NATIONAL ACADEMY ASSOCIATES**

## **2020 Youth Leadership Program**

### **ESSAY – “What is Leadership”**

(Use additional pages necessary)

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_