

Help Increase the Peace Program “Peace-ing Ourselves Together”

Sponsored by VolunteerLEON Youth Corps

**9 a.m. – 5 p.m. June 19 – 23 , 2006 (Monday-Friday)
Lawrence-Gregory Community Center at Dade Street
1115 Dade Street**

What is it? A fun non-violence and leadership workshop where you learn through games, discussion, and others' experiences in a small, diverse group.

Who is it for? Middle and high school students, and adults who enjoy working with youth.

How is it structured? The workshop is broken up into 3 segments: Basic, Advanced, and Training for Trainers. Basic HIPP focuses on conflict resolution, communication, teamwork, leadership, and trust. The Advanced segment centers on diversity issues (race, gender, age, etc.). The last two days are for those interested in taking their HIPP experience the extra step and becoming a certified HIPP Facilitator.

June 19 – Basic HIPP Day 1
June 20 – Basic HIPP Day 2
June 21 – Advanced HIPP

June 22 – HIPP Facilitator Day 1
June 23 – HIPP Facilitator Day 2

Background: The Help Increase the Peace (HIPP) is a program of the American Friends Service Committee, a Nobel Peace Prize-winning Quaker organization. HIPP is a nonreligious program that began in 1991 in Syracuse, N.Y. and expanded to 19 states and abroad. The Youth Corps' HIPP is one way we address the prevention focus area in our community.

For more information on Youth Corps, go to www.volunteerleon.org/YouthCorps
For more information on HIPP, go to: <http://www.afsc.org/hipp.htm>

SELECTION CRITERIA

We seek a diverse group of participants who:

- Are in middle or high school or are adults who volunteer or work with children or teens
- Are able to commit to the program without having other obligations
- Are interested in improving their leadership and community service skills
- Are most likely to utilize their HIPP training to benefit Leon County

**COMPLETED APPLICATIONS ARE DUE TO YOUTH CORPS BY
THURSDAY, JUNE 15
(918 Railroad Ave., Tallahassee 32310 or by fax at 606-1971)**

YOUTH APPLICATION
Help Increase the Peace Program
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**COMPLETED APPLICATIONS ARE DUE TO YOUTH CORPS BY
THURSDAY, JUNE 15
(918 Railroad Ave., Tallahassee 32310 or by fax at 606-1971)
Applicants who are not members of Youth Corps should also submit a
Youth Corps application.**

PERSONAL DATA: (Please type or neatly print using blue or black ink.)

Name (last, first, middle initial):

Date of Birth:

Home Address (street, city, zip):

Home Phone:

Cell Phone:

Email:

T-Shirt Size

School & grade:

PARENTAL INFORMATION

Parent/Guardian Name (last, first, middle initial):

Home Address (street, city, zip):

Home Phone:

Cell Phone:

Work Phone:

Email:

Signature

Please include the name of the person responsible for dropping up and picking up your child from the workshop. Any changes must be submitted in a signed letter to a VolunteerLEON representative the morning of the day the change will be in effect.

Name(s): _____

Short Answer:

In 75 words or less say why you wish to participate in HIPP, why you should be selected, and how you will use in your school, organization, or group the skills that you learn in HIPP.

The program is free and snacks will be provided, however **participants will need to bring their own lunches.**

Please provide information about any food allergies: _____

COMMITMENT

Please select and sign **one** of the following choices:

- I plan to attend the entirety of the three day Basic and Advanced HIPP (Monday – Wednesday).
- I plan to attend **just** the Facilitator’s Training HIPP (Thursday & Friday).
 I have previously participated in an entire Basic and Advanced HIPP.
Date of Basic attended: _____ Date of Advanced: _____
- I plan to attend the entire five day program (Basic, Advanced, & Facilitators).

Participants who have other commitments during those times are asked **not** to apply.

I understand the requirements and limitations of this program and commit to the selection I have made above.

Applicant Signature

Date

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.

Signature of Parent/Guardian

Date

Application is due by THURSDAY, JUNE 15 to Youth Corps at the below address. If you are not a member of Youth Corps also submit a Youth Corps application.

**918 Railroad Avenue Tallahassee, FL 32310
(850) 606-1970 Fax: (850) 606-1971
Questions? Contact Olamidé at the above number or email
dawoduo@leoncountyfl.gov**

ADULT APPLICATION
Help Increase the Peace Program
Sponsored by VolunteerLEON Youth Corps

**COMPLETED APPLICATIONS ARE DUE TO YOUTH CORPS BY
THURSDAY, JUNE 15
(918 Railroad Ave., Tallahassee 32310 or by fax at 606-1971)**

PERSONAL DATA (Please type or neatly print using blue or black ink.)

Name (last, first, middle initial):

Home Address (street, city, zip):

Home Phone:

Cell Phone:

Email:

Job Title:

T-Shirt Size

Employer:

Work Phone:

CURRENT WORK (INCLUDING VOLUNTEER WORK) INVOLVING YOUTH:

PROVIDE THE NAME AND PHONE NUMBER OF AN EMPLOYER OR PERSONAL REFERENCE WHO IS NOT A RELATIVE:

SHORT ANSWER:

In 75 words or less say why you wish to participate in HIPP, why you should be selected, and how you will use the skills that you learn in HIPP in your work with youth.

The program is free and snacks will be provided, however **participants will need to bring their own lunches.**

Please provide information about any food allergies: _____

COMMITMENT

Please select and sign **one** of the following choices:

- I plan to attend the entirety of the three day Basic and Advanced HIPP (Monday – Wednesday).
- I plan to attend **just** the Facilitator’s Training HIPP (Thursday & Friday).
 I have previously participated in an entire Basic and Advanced HIPP.
Date of Basic attended: _____ Date of Advanced: _____
- I plan to attend the entire five day program (Basic, Advanced, & Facilitators).

Participants who have other commitments during those times are asked **not** to apply.

I understand the requirements and limitations of this program and commit to the selection I have made above.

Applicant Signature

Date

Application is due by THURSDAY, JUNE 15 to Youth Corps at the below address.

918 Railroad Avenue Tallahassee, FL 32310
(850) 606-1970 Fax: (850) 606-1971
Questions? Contact Olamidé at the above number or email
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VolunteerLEON Youth Corps

918 Railroad Avenue, Tallahassee, Florida 32310

Phone: (850) 606-1970 Fax: (850) 606-1971

E-mail: youthcorps@leoncountyfl.gov

Today's Date: _____

Please Type or Print

Name:

Mailing Address:

City, State, Zip Code:

Home Phone:

Email Address:

School:

Current Grade:

Date of Birth (m/d/y):

Emergency Contact Name:

Number:

Name of personal reference (ex. teacher, minister):

Number:

Are you in any clubs, service groups, etc.? If so, list them.

Do you hold any leadership positions? If so, list below.

Are you interested in taking a leadership position?

Yes:

No:

Are you interested in the following? Place an "X" in the appropriate box.

Group Projects:

Individual Vol. Opportunities:

Both:

Check your areas of interests. Place an "X" by all that apply.

HIV/AIDS:	Intergenerational concerns:	Library:
Environment:	Prevention issues:	Other:
Animals:	Youth Corps Leadership Council:	Other:
Disaster Preparedness:	Volunteer in the office:	Other:
Disabilities:	Technology:	Other:
School Improvement:	Children:	Other:

By signing below, I verify that all information stated above is true to the best of my knowledge. I understand that all information on this form is voluntarily supplied and may be disclosed for volunteer purposes only. I grant permission for _____ to participate in VolunteerLEON Youth Corps. I authorize VolunteerLEON and its agents to use photograph(s) of _____ for the specific purpose of publications and promotion and hereby release and hold harmless VolunteerLEON or its agents from any liability.

Applicant's Signature: _____

Parent/Guardian's Signature: _____