

Rotary Youth

Leadership Awards

In District 6940

# INFORMATION PACKET

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## INTRODUCTION

Officially adopted by Rotary International in 1971, Rotary Youth Leadership Awards (RYLA) is one of the most significant and fastest-growing programs of Rotary service. Each year, thousands of young people take part in the program worldwide. The impact spreads further as the program influences other young people, and RYLA programs often lead to the formation or strengthening of Rotaract and Interact clubs.

**Leadership, Citizenship & Personal Development** - RYLA is an intensive training program for community youth leaders. Each spring, 10<sup>th</sup> - graders chosen for their past service to the community and leadership potential are awarded an all-expenses-paid camp to discuss leadership skills and to learn those skills through practice.

### **RYLA AIMS:**

1. Demonstrate Rotary's respect and concern for youth
2. Provide an effective training experience for selected youth and potential leaders
3. Encourage leadership of youth by youth
4. Publicly recognize young people who are providing service to their communities

### **RYLA Seminars:**

Awardees attending the RYLA seminars can expect to further develop their personal and leadership skills in the following key areas:

1. *Communication Skills*: Participants will have the opportunity to: develop interpersonal skills; communicate, listen and write more effectively; engage in some form of public speaking in a warm, supportive environment
2. *Personal Qualities*: Participants will have the opportunities to: identify the various types of personality; help people to get along with each other; manage their own time more effectively; avoid stressful situations; plan for healthier living
3. *Leadership*: Participants will have the opportunity to: identify the characteristics of effective leaders; become aware of the various styles of leadership; observe effective leaders operating in a meeting situation
4. *Problem Solving Strategies*: Participants will have the opportunity to: brainstorm and think creatively; engage in practical problem solving and decision making activities; use a problem solving model in a practical situation

## FACT SHEET

**Dates:** Thursday, March 24th to Sunday, March 27<sup>th</sup>, 2011

**Place:**

Wallwood Boy Scout Camp

850-627-3269

<http://www.suwanneeriver.net/wallwood.asp>

**Timeline:**

- *September 2010 – Rotary Clubs have selected RYLA Chairs per each club.*
- *September 2010- Rotary Clubs commit to a planned number of students.*
- *October/November 2011- Rotary Clubs send appropriate tuition total (# of children x \$275.00) to Pamela Langham*
- *December 2010 - RYLA applications are distributed to nominees.*
- *January 2011 - Applications are received and reviewed by Rotary clubs. Interviews are scheduled. Students are selected.*
- *January 2011 - Applications of selected students are sent to Pamela Langham*
- *February 2011 - Final transportation arrangements are made.*
- *March 2011 - RYLA*

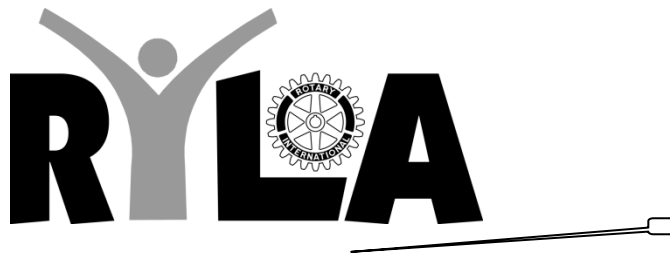
**Cost to Clubs:** Tuition is \$275.00 per each student. Clubs should make check payable to Rotary District 6940 RYLA. Transportation cost varies with travel distance and is not part of tuition. Please make club checks payable to Rotary Dist. 6940 RYLA Account and send to RYLA Logistics Chair Pamela Langham at 91 Baybridge Drive Gulf Breeze, FL 32561.

**Transportation:** *Each Rotary club is responsible for getting their students to RYLA. Most clubs coordinate transportation with other area clubs to car (van) pool. Some clubs utilize church vans and personal vehicles. Other clubs rent vans from vendors such as Enterprise. In the past, the average fuel/van cost for rentals has been \$60 to \$70 per student.*

## SELECTION PROCESS

Since there is wide-spread agreement among Rotarians involved with RYLA in District 6940 that the success of RYLA is, in a large degree, affected by the type of student selected to attend, the RYLA Organizing Committee adopted the following recommended selection process on July 24, 2004.

1. First, RYLA is **SPECIAL and should be presented as an AWARD for past service or demonstrated leadership potential**. Instead of indiscriminately blanketing a campus with RYLA applications, **nominations from all teachers/guidance counselors/etc. of 10<sup>th</sup> grade students should be solicited**. Through the use of the one page **MEMO TO TEACHERS**, the optimal RYLA candidate (**i.e. an emerging achiever in need of a little boost**) can be communicated to teachers so a quality field of candidates can be assembled.
2. Once a group of students have been nominated by the teachers, a Rotarian and a RYLA graduate should do a short talk about RYLA to the field of candidates. RYLA talks are most effective when pictures of past years are available.
3. After the meeting, the RYLA two page applications should be distributed to students who continue to be interested.
4. Once applications are returned, short 10-15 minute interviews should be scheduled with the students. In this way, your club will be able to make quality selections based on first hand knowledge. If there are too many applicants to interview, perhaps Rotarians could meet with the school principal/councilor to cull the group to a manageable number. The interview is also a good time to verify the student's schedule is clear for RYLA and that the student definitely has an interest. In addition to selecting the number of students your club has budgeted for RYLA, a number of alternates should be selected. Drop-outs are possible and a good group of alternates minimizes this risk. **We recommend each club select one or two alternates.**
5. **After selections have been made, prompt phone calls to the selected students and their parents should follow. Alternates should be called at the same time to make sure your club has a solid backup in the event of a last minute withdraw.**
6. Mail or Fax the front page of the application for each selected student to **Pamela Langham** so official "award" letters can be sent. It is not necessary to send the application of alternates unless one of your students drops out.



## **MEMO TO TEACHERS**

**From:** THE ROTARY CLUB OF \_\_\_\_\_

**Re:** ROTARY YOUTH LEADERSHIP AWARDS - March 24-27, 2011

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Every spring, Rotary clubs across northwest Florida, from Pensacola to Lake City, award an intensive leadership training weekend to approximately seventy tenth grade students. The weekend is paid for completely by sponsoring Rotary clubs and is run entirely by Rotary club members. At RYLA, your tenth graders will learn the different styles of leaders, will learn how to take charge of a group, will learn to speak publicly, will learn ethics, problem solving and will build confidence by taking reasonable risks.

In awarding our weekend, we have a certain type of student in mind. Here is what we are looking for:

1. Current 10<sup>th</sup> graders only.
2. Males and Females
3. All colors, creeds and interests.
4. A student who is on the cusp of taking charge but needs just a little boost. That is, we desire a student who has shown an interest in service but needs some encouragement and confidence building to take charge.
5. We are looking for "C" students, "B" students and "A" students but not necessarily the "straight-A captain of the football team or cheer leading squad." We like interesting mixes.

If you know of a student fitting the above criteria who has an interest in personal growth, please forward their name to \_\_\_\_\_ by \_\_\_\_\_.

Thank you for helping us train the next generation of leaders.

If you have questions, please contact \_\_\_\_\_ of the \_\_\_\_\_ Rotary Club at \_\_\_\_\_.



**ROTARY YOUTH LEADERSHIP AWARDS  
ROTARY DISTRICT 6940 APPLICATION**

**Leadership, Citizenship & Personal Development** - Every spring, Rotary clubs across North West Florida, from Pensacola to Lake City, award an intensive leadership training weekend to approximately seventy tenth grade students. The weekend is paid for completely by sponsoring Rotary clubs and is run entirely by Rotary club members. At RYLA, tenth graders will learn the different styles of leaders, will learn how to take charge of a group, will learn to speak publicly, will learn ethics, problem solving and will build confidence by taking reasonable risks. For more information about RYLA in this area, please see our district website. [www.rotary6940.org/ryla](http://www.rotary6940.org/ryla)

(Please print or type with dark ink)

Name \_\_\_\_\_ Current GPA: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Sex \_\_\_\_\_ T-shirt Size(S M L XL) Phone \_\_\_\_\_

*Note: Email address may be parent or student. We use this to confirm your status during the selection process and rapidly forward important information.*

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

**Please complete this application ONLY if you are available to attend  
RYLA on: March 24 – 27, 2011:**

- 1) List your two favorite academic subjects and tell why they are your favorites:
  
  
  
  
  
  
  
  
  
  
- 2) List your hobbies, sports involvement and other interests:
  
  
  
  
  
  
  
  
  
  
- 3) List organizations and/or activities with which you have been involved:
  
  
  
  
  
  
  
  
  
  
- 4) Why are the activities and interests in questions two and three important to you?

5) Define Leadership:

6) What do you think is the most important problem facing today's high school student? What solutions can you suggest?

7) What do you think is the most critical problem facing your community? What solutions can you suggest?

8) Describe briefly your reason for applying for this RYLA workshop:

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

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please include one letter of recommendation from someone other than your parent or guardian. This recommendation should be attached in a sealed envelope.*

PLEASE RETURN THIS APPLICATION TO YOUR SCHOOL SPONSOR WHO WILL RETURN TO YOUR LOCAL ROTARY CLUB

# Personal Health and Medical History

To be filled out by parent, guardian or adult participant. Please print in ink.

## IDENTIFICATION

Name \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of parent or guardian \_\_\_\_\_

Home address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home telephone number \_\_\_\_\_ Alternate contact number \_\_\_\_\_

### If person named above is not available in the event of an emergency, notify:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Telephone \_\_\_\_\_

Name of personal physician \_\_\_\_\_ Telephone \_\_\_\_\_

Personal health/accident insurance carrier \_\_\_\_\_

Policy no. \_\_\_\_\_

### Check all the items that apply, *past or present*, to your health history. Explain any "Yes" answers.

**ALLERGIES:** Food, medicines, insects, plants Yes  No

Explain: \_\_\_\_\_

### GENERAL INFORMATION:

**ADHD** Yes  No

**Asthma** Yes  No

**Cancer/leukemia** Yes  No

**Kidney disease** Yes  No

**Diabetes** Yes  No

**Heart trouble** Yes  No

**Hemophilia** Yes  No

**High blood pressure** Yes  No

**Convulsions/seizures** Yes  No

Explain: \_\_\_\_\_

\_\_\_\_\_

Please list all medications taken in the 30 days **prior** to arrival to RYLA activity: \_\_\_\_\_

\_\_\_\_\_

List any medications to be taken at RYLA activity: \_\_\_\_\_

\_\_\_\_\_

List any physical or behavioral conditions that may affect or limit full participation in swimming, backpacking, high ropes/low ropes course, hiking long distances or playing strenuous physical games: \_\_\_\_\_

\_\_\_\_\_

List equipment needed such as braces, glasses, contact lenses, etc.: \_\_\_\_\_

\_\_\_\_\_

Please list any diet restrictions: \_\_\_\_\_

\_\_\_\_\_

Please list any activity restrictions: \_\_\_\_\_

\_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

I give my permission for full participation in the RYLA Program subject to limitations noted herein.

**In case of an emergency**, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the licensed health-care practitioner selected by the adult leader in charge to secure proper medical treatment for my child (or for me, if participant is an adult).

ROTARY YOUTH LEADERSHIP AWARDS  
ROTARY DISTRICT 6940

CODE OF CONDUCT

I UNDERSTAND THAT:

1. I have made a commitment to attend the RYLA conference and will notify my sponsoring club immediately if a conflict arises and I am unable to attend.
2. I will not arrive late or leave the conference earlier than the conference's program schedule and I will use the RYLA supplied transportation.
3. I will attend all meetings and activities with my discussion groups
4. Meals will be eaten with my discussion group and my group is responsible for cleaning our table after each meal.
5. I must sleep in the dorm to which I am assigned. "Lights out" is at the scheduled time. It means I will be quiet thereafter.
6. There are separate dorms for males and females. Males are not allowed in female rooms and vice versa.
7. Cell phones, pagers, Walkmans, radios and such are NOT permitted, so that we may foster an environment of independence.
8. Recreation activities are limited to those periods of the day and evening scheduled for such activities.
9. If any person is injured or becomes ill, I will not move them. I will contact an adult immediately.
10. I will report any damage or breakage immediately to my facilitator or group leader. I will take care of camp facilities.
11. Medications, whether over-the-counter or prescribed, must be identified on the container and described on the permission form.
12. Unidentified medications, drugs, alcohol, weapons or tobacco are prohibited and will be confiscated.
13. Foul, coarse or abusive language (including anything of a discriminatory nature) will not be tolerated. Physical violence and threats of violence are not tolerated.
14. Any sexual or lewd misconduct between me and other participants else is unacceptable.
15. I will not leave camp for any reason without permission of RYLA Chairperson.
16. Confidentiality is important. Anything you have shared or shared with your family group should remain in that group; however, camp officials are mandated by law to report any suicide or abuse issues to the proper authorities.
17. I will respect the environment of the camp and surrounding area and will do all in my ability to protect it for future generations.
18. I am to conduct myself in all sessions and activities in a manner which will honor myself, my school, my sponsoring Rotary club and my family.
19. SHOULD MY CONDUCT BE CONSIDERED UNACCEPTABLE, AT ANY TIME AT THE DISCRETION OF RYLA OFFICIALS, I UNDERSTAND THAT I WILL BE DISMISSED FROM RYLA AND WILL BE SENT HOME AT MY PARENT'S OR GUARDIAN'S EXPENSE.

By signing below, I hereby agree and commit to honor this Code of Conduct.

Student: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**PARENTAL INFORMED CONSENT AND  
RELEASE/INDEMNITY/HOLD-HARMLESS AGREEMENT**

I understand participation in the ROTARY YOUTH LEADERSHIP AWARDS, offered through ROTARY DISTRICT 6940 at the Wallwood Boy Scout Reservation on March 24-27, 2011 involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after carefully considering the risk involved, and having full confidence that precautions will be taken to ensure the safety and well-being of my (son/daughter), I have given \_\_\_\_\_ (son/daughter) my consent to participate in High & Low Elements Challenge Course, and:

**RELEASE AND INDEMNIFICATION**

I hereby release and waive any and all claims that I may have against Rotary International, Rotary District 6940 Clubs, Boy Scouts of America Suwannee River Council, BSA and their employees, agents, representatives, or volunteers arising from my child's participation in Rotary Youth Leadership Awards. I AGREE TO FULLY INDEMNIFY AND HOLD HARMLESS ROTARY INTERNATIONAL, ROTARY DIST. 6940 CLUBS, BOY SCOUTS OF AMERICA SUWANNEE RIVER COUNCIL, BSA, AND THEIR EMPLOYEES, AGENTS, REPRESENTATIVES, AND VOLUNTEERS FROM ANY AND ALL CLAIMS ARISING FROM MY CHILD'S PARTICIPATION IN ROTARY YOUTH LEADERSHIP AWARDS. THIS INDEMNIFICATION EXPRESSLY INCLUDES ANY CLAIMS ARISING OUT OF ROTARY INTERNATIONAL, ROTARY DIST. 6940 CLUBS, BOY SCOUTS OF AMERICA SUWANNEE RIVER COUNCIL, BSA'S OWN NEGLIGENCE OR FAULT OR THAT OF THEIR EMPLOYEES, AGENTS, REPRESENTATIVES, OR VOLUNTEERS. I AGREE THAT THE INDEMNIFICATION INCLUDES THE AMOUNT OF THE CLAIMS, THE EXPENSES OF DEFENDING AGAINST THE CLAIMS, COURT COSTS, AND ATTORNEYS' FEES.

In case of emergency, I understand that every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

This form must have both parent/guardian signatures.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date