



Capital Area Student Leadership 2022 Application

Application Deadline: **Wednesday, December 15, 2021**. Complete the application online through our application portal (www.ConcordNHChamber.com/CASL) or submit this application form by email to programs@ConcordNHChamber.com.

Permission by a parent/guardian and school official will be required to participate.

CASL is a student leadership program designed to foster independent thinking, confidence and problem solving. Students with questions regarding the program or application, are encouraged to contact the Greater Concord Chamber of Commerce at (603) 224-2508 or programs@ConcordNHChamber.com.

PERSONAL INFORMATION

Name

Last: _____ First: _____ Nickname: _____

Address: _____

City: _____ State: _____ Zip: _____

Email*: _____ Phone: _____

**Please provide a non-school contact email. Some school emails are blocked from external emails for security purposes.*

School: _____

Parent/Guardian: _____

Parent/Guardian email: _____

Hobbies/Interests: _____

ORGANIZATIONS/ACTIVITIES

Please list (in order of importance to you) the non-school activities in which you have participated:

Activities/Organizations Date of Participation

Select one activity/organization and briefly explain how you have benefited from it:

SCHOOL EXPERIENCE

List in order of importance to you the school activities in which you have been involved:

Activities Date of Participation

Explain the importance of any one activity to you:

Academic areas of interest:

GENERAL INFORMATION

What do you hope to gain from participation in the Capital Area Student Leadership Program?

What opportunities have you taken advantage of in your community?

What do you do that you don't get recognized for?

What is the Capital area's greatest asset and why?

What do you think is the Capital area's greatest challenge and why?

How would you address this challenge?

Tell us about a challenge you faced during the pandemic. How did you overcome this challenge?

In what ways do you think you could give back to your community after participating in CASL?

We'd like to know more about you. Please describe a leadership role you have taken, and why you feel you should be selected for the 2022 CASL program (please attach additional pages if you need more room).

REFERENCES

Please list two references who you know well, other than a parent or relative (Example: neighbor, coach, music instructor).

Name _____ Telephone: _____

Address: _____

Relationship: _____

Name _____ Telephone: _____

Address: _____

Relationship: _____