**62nd ANNUAL UNITED STATES SENATE YOUTH PROGRAM**

**2023-2024 Colorado Student Application**

**Applications Due: Friday, October 20, 2023, by 11:59 pm**

**Note: Colorado student applications will be completed using the online application form. The online system does not save works in progress so applicants may wish to complete their information in this document and copy responses into the online application. Please ensure all required uploads are completed and ready to be attached when you begin the online form.**

**Submit all application materials through the** [**online application form**](https://app.smartsheet.com/b/form/53184af58a2747138c65de8c636837d6)**.**

# SECTION I: STUDENT AND SCHOOL DISTRICT INFORMATION

| STUDENT INFORMATION | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Full Name:**  [First, Middle, Last] | |  | | | | | | | | | | | | | | |
| **Date of Birth:**  [Month/Day/Year] | | | |  | | | | | | **Student Gender:** | | |  | | | |
| **Student Preferred Name:** | | | |  | | | | | | | | | | | | |
| **Student Home Phone:** | |  | | | | | **Student Cell Phone:** | | | | |  | | | | |
| **Student E-mail Address:** | | | |  | | | | | | | | | | | | |
| **Mailing Address:**  [Street, City, State, Zip] | |  | | | | | | | | | | | | | | |
| **Congressional District:** | |  | | | | | | | | | | | | | | |
| **Full Name of 1st Parent/Guardian:** | | | | |  | | | | | | | | | **Prefix:** | |  |
| **Parent/Guardian Phone:** | | |  | | | | | **Parent/Guardian E-mail:** | | |  | | | | | |
| **Sole guardian?** | Yes  No | | | | **Parent/Guardian Mailing Address:**  [Street, City, State, Zip] | | | |  | | | | | | | |
| **Full Name of 2nd Parent/Guardian:** | | | | |  | | | | | | | | | **Prefix:** | |  |
| **Parent/Guardian Phone:** | | |  | | | | **Parent/Guardian E-mail:** | | | | |  | | | | |
| **Parent/Guardian Mailing Address:**  [Street, City, State, Zip] | | | | |  | | | | | | | | | | | |
| **Student’s Current Year in High School:** | | | | | | Junior  Senior | | | | **Expected Graduation:**  [Month/Year] | | | | |  | |
| **Student Residency** | | | | | | | | | | | | | | | | |
| *Per the United States Senate Youth Program rules, students must be a U.S. citizen or a legal permanent resident to apply to the program.* | | | | | YES I am a U.S. citizen  ☐ NO I am not a U.S. citizen, but I am a permanent resident in possession of my official Green Card at the time of this application. Having applied for a Green Card, but not in possession, means you cannot apply for USSYP. | | | | | | | | | | | |
| *Per the United States Senate Youth Program rules, the student is enrolled for the entire academic year in a public or independent high school located in the state in which at least one of their parents or guardians is a current resident.* | | | | | | | | | | | | | | | | Yes  No |

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| SCHOOL AND DISTRICT INFORMATION | | | | |
| **High School Name:** |  | | **School District:** |  |
| **School Address:**  [Street, City, State, Zip] |  | | | |
| **School Phone:** |  | | **School Type:** | Public School  Private School |
| **Principal Name:** |  | | | |
| **Principal E-mail Address:** | |  | | |

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| **QUALIFYING LEADERSHIP POSITION** |
| **Mark the ELECTED/APPOINTED office you now hold for the entire 2023-2024 school year in one of the following student government, civic, or educational organizations:** |
| ☐ Student Body President ☐ Class President  ☐ Student Body Vice President ☐ Class Vice President  ☐ Student Body Secretary ☐ Class Secretary  ☐ Student Body Treasurer ☐ Class Treasurer  ☐ Student Council Representative  ☐ Officer in a National Honor Society chapter  ☐ Student representative elected or appointed (appointed by a panel, commission or board) to a local, district, regional or state-level civic, service and/or educational organization whose primary purpose is public/community service and constituent representation. Such positions will be subject to approval by the state selection administrator. |
| **What is your qualifying position if not student body or Honor Society officer:** |
|  |
| **What do you do to serve your community and support your constituency year-round in this position:**  [Limit 50 words]. |
|  |
| **Provide a brief paragraph listing your leadership positions and academic honors, including community service, other extracurricular pursuits, and general plans for college and career in order of importance.** Note: If selected as a delegate or alternate, this brief paragraph will be submitted with your participation information. [Limit 150 words] |
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# SECTION II: SCHOOL, PARENT/GUARDIAN, AND STUDENT SIGNATURES

Upload your SCHOOL, PARENT/GUARDIAN, AND STUDENT SIGNATURES form in Word or PDF in your online application.

Additional copies of this form may be used to obtain the information/signatures. Please make sure to name your file in this format: LastName\_Signatures.

|  |  |  |  |  |  |  |  |  |  |  |
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| TO BE COMPLETED BY STUDENT’S SCHOOL GUIDANCE DEPARTMENT and SCHOOL PRINCIPAL | | | | | | | | | | |
| **High School Grade Point Average:** | **Last Semester:** [Spring 2023] | | |  | | | **Unweighted GPAs:**  [if applicable] | |  | |
| **Cumulative GPA:** [HS Career] | | |  | | |  | |
| **Number of Students in Student’s Graduation Class:** | | | |  | **Class Rank:** [if applicable] | | | |  | |
| **What is your rank in scholastic standing of your class?** | | **Upper 1%  Upper 5 %  Upper 10 %  Upper 15%  Upper 25 %** | | | | | | | | |
| **What is your ELECTED /APPOINTED office for the 2023-2024 School Year?** | | | | | |  | | | | |
| **SCHOOL’S GUIDANCE DEPARTMENT SIGNATURE** | | | | | | | | | | |
| *I certify that all student academic and USSYP-qualifying leadership position information listed in this application is correct*. | | | | | | | | | | |
| **Name of Guidance Official:** | | |  | | | | | | | |
| **Signature of Guidance Official:** | | |  | | | | | | | |
| **SCHOOL PRINCIPAL SIGNATURE** | | | | | | | | | | |
| *In addition to my letter of recommendation, I verify this student is holding the leadership position noted above and is endorsed to represent our school and state if chosen:* | | | | | | | | | | |
| **Name of School Principal:** | | |  | | | | | | | |
| **Signature of School Principal:** | | |  | | | | | Date (MM/DD/YY) | |  |

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| PARENT/GUARDIAN SIGNATURE | | | |
| *Parents or guardians must sign below to approve for you to go to Washington, D.C. for a week to attend the United States Senate Youth Program under the conditions set forth in the rules and regulations of the program brochure:* [*https://ussenateyouth.org/wp-content/uploads/2023/04/USSYP-2024-Official-Brochure.pdf*](https://ussenateyouth.org/wp-content/uploads/2023/04/USSYP-2024-Official-Brochure.pdf) | | | |
| **1st Parent/Guardian Signature:** |  | Date (MM/DD/YY) |  |
| **2nd Parent/Guardian Signature:**  [if applicable] |  | Date (MM/DD/YY) |  |

|  |  |
| --- | --- |
| STUDENT SIGNATURE | |
| *I certify that I have carefully read the United States Senate Youth qualifications and program rules; that all the information in this application is correct; and that I do not currently have a scheduling conflict; and I understand complete attendance at the Washington Week program is required to receive the scholarship.* | |
| **Student Signature:** |  |

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# SECTION III: WRITTEN APPLICATION ESSAYS

1. **Submit a personal essay describing each of the following elements as they pertain to you:**

Current elected student position held and all past involvement in student government/leadership;

Activities and achievements that demonstrate leadership in school and community that specifically support your desire to serve as your USSYP State delegate;

Involvement in community service initiatives or programs outside of school;

How your participation in USSYP will enhance your understanding and interest in the political and governmental process of the United States; and

Share ways in which you think being chosen for the U.S. Senate Youth Program will help you explore some of the most important questions you have at present about the challenges facing the country.

2. **Submit a persuasive essay researched and written on a topic of social significance related to a contemporary state, national, or world event.** Select a topic important to you, take a stand, relate its importance to you, and defend your position. The essay will be judged on organization, ideas and content, evidence of personalization, and writing conventions ***including citation of sources***.

**Required format:**

Limit responses to 500 words or less per essay. Points will not only be awarded for how well the applicant addresses the question, but also for grammar, spelling, and punctuation.

Make sure to have someone proofread your essays and application for omissions and errors.

Save the completed essays in Word or PDF and name your file in this format: LastName\_StudentEssays.

Upload in the “Upload Required Documents” section of the online application.

# SECTION IV: VIDEO PRESENTATION

Note: Public speaking is a core component of the USSYP. Each student applicant should prepare a short video presentation, no more than 3 minutes in length, as part of the 2024 application, to be judged for public speaking skill, vocabulary, originality, organization of presentation, knowledge of any material or content presented, clarity of artwork (charts, graphs, slides if used) and overall presentation.

**Instructions**

Please submit a video presentation of **no more than 3 minutes in length** on this topic:

Imagine that you are a newly elected Senator from Colorado. Describe who you are, why you are proud to represent the state of Colorado.

Tell us the personal characteristics you feel will make you an effective leader in Washington.

Note what legislative initiatives you will champion and why they are important to you and your constituents.

Please note any historical leadership figures you would like to emulate.

**Submission**

* + - You may use the platform that works best for you (YouTube, Vimeo, recorded from a device and shared via Google folder link, etc.).
    - Important: please ensure that your video link is not set to “Private” and can be accessed by application reviewers.
    - Provide the link to access your presentation in the space provided in the online application form.

| **Link to Video:** | Click here to enter text. |
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# SECTION V: LETTER OF RECOMMENDATION – SCHOOL PRINCIPAL OR TEACHER

**Recommendations may be attached as a separate page, in letter format, but should address the areas on the corresponding recommendation form below.**

\*This recommendation should be from either the applicant’s high school principal or a teacher.

Upload your SCHOOL PRINCIPAL or TEACHER recommendation form in Word or PDF in your online application. Please make sure to name your file in this format: LastName\_Recommendation1.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Reference Name:** | | |  | | | | | **Title:** |  | | | |
| **Telephone:** |  | | | | **E-mail Address:** | |  | | | | | |
| **Organization:** | |  | | | | | | | | | |  |
| **How long and in what capacity reference has known applicant:** | | | | | |  | | | | | | |
| **Reference Signature:** | | | |  | | | | | | **Date:** |  | |

For the following qualities, please describe how the nominated student goes above and beyond.

* Leadership and public speaking ability
* Demonstrated responsibility, maturity, and achievement
* Participation in a wide selection of activities on and off campus
* Interpersonal skills
* Briefly describe what is unique about this student. How does this student stand out from other students?

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# SECTION V: LETTER OF RECOMMENDATION – ADULT REPRESENTATIVE

**Recommendations may be attached as a separate page, in letter format, but should address the areas on the corresponding recommendation form below.**

\*This recommendation should be from another adult representative of an organization or activity where the student has a record of leadership and service to others and/or where the student is currently holding a qualifying leadership position for USSYP.

Upload your Adult Representative recommendation form in Word or PDF in your online application. Please make sure to name your file in this format: LastName\_Recommendation2.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Reference Name:** | | |  | | | | | **Title:** |  | | | |
| **Telephone:** |  | | | | **E-mail Address:** | |  | | | | | |
| **Organization:** | |  | | | | | | | | | |  |
| **How long and in what capacity reference has known applicant:** | | | | | |  | | | | | | |
| **Reference Signature:** | | | |  | | | | | | **Date:** |  | |

For the following qualities, please describe how the nominated student goes above and beyond.

* Leadership and public speaking ability
* Demonstrated responsibility, maturity, and achievement
* Participation in a wide selection of activities on and off campus
* Interpersonal skills
* Briefly describe what is unique about this student. How does this student stand out from other students?