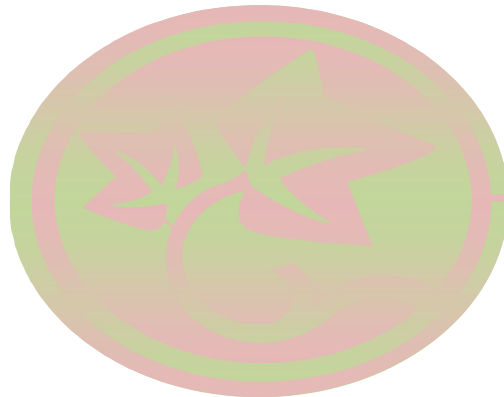




*ALPHA KAPPA ALPHA* Sorority Inc.

*A legacy of sisterhood and service*

THE IOTA BETA OMEGA CHAPTER



IVY PROTÉGÉ EMPOWERMENT

And

LEADERSHIP AKADEMY

2009-2010 Application





Dear Ivy Protégé Applicant,

You are it! There is nothing in this world more important, more precious than you. I want to applaud and thank you for expressing an interest in applying to the Ivy Protégé Empowerment and Leadership AKAdemy experience. The AKAdemy is a program of the Iota Beta Omega Chapter of Alpha Kappa Alpha Sorority Inc. whose mission is to equip and encourage young girls to become women of excellence in all aspects of their lives.

The AKAdemy is a unique empowerment and leadership program that was developed with hopes of strengthening the local community by leading young women of color through the uncertain years of adolescence.

By applying to be a part of the AKAdemy, you are showing an interest in becoming a part of the program that represents an investment in our community. The AKAdemy is an interactive, hands-on experience focusing on self discovery, self-determination, self-responsibility, to develop leadership skills for different roles you can have in your community. The purpose is to provide knowledge and develop leadership skills that empower and further inspire you to become involved in and committed to the community. This is all done while having fun and building sistership that can last a lifetime!

Through sponsorship of monthly Saturday sessions, the AKAdemy guides its mentees on a yearlong rite of passage by addressing topics such as image, responsibility, fitness, and higher education.

Although there is no fee to join the AKAdemy, we are looking for dedicated young women who have a passion to learn and are willing to explore their potential through their participation in program. In order to be eligible:

- *You must be at least 14 years old by September 29, 2009*
- *You must complete the attached application and return it no later than Friday July 18 by 5 p.m.*  
*All applicants will be notified of acceptance in early August.*

If selected as a participant, you will have access to scholarship opportunities, interact with positive peers, become part of a wonderful sistership, and be able to attend all The AKAdemy sponsored events (cultural festivals, art galleries, theater, skating etc.). These are the kind of opportunities that we want to provide to you, so please take the next step and fill out the application and **return it by Friday, July 18, 2009**. Good luck!

We look forward to receiving your application. Applying and participation are free; the *experience*, “*priceless!*”

T. Martina Porter  
Iota Beta Omega Chapter  
Chair, Ivy Protégé Empowerment and Leadership AKAdemy



## **Program Description**

Is an inspirational, interactive, personal development guide for girls in 8<sup>th</sup> through 12<sup>th</sup> grades. Sessions will be presented in an easy, fun, and informal style, this course offers a 21<sup>st</sup> Century approach to issues of self-esteem and life's challenges.

The course will attract the presenter-participant's undivided attention and desire to be an active rather than passive onlooker.

Its message uniquely captures and affirms the "good" girl who is constantly bombarded into giving up her morals and values to being "part of the crowd." At the same time, it provides comfort and specific guidelines for those who have strayed into the "cesspools of the world" to recover with dignity.

The AKAdemy constantly identifies and reminds the young woman that the best existence is "being comfortable in my own skin, regardless of shape, size, and color." Being comfortable with oneself, and keeping that unique self in the best of condition (mentally, socially, physically), assures a standard of excellence at any given time.

Participants will experience a world outside their community. Enrichment trips include visits to cultural festivals, museums, live theater, career development, day-in-the life... and more.

The girls will participate in discussions like, "What is a true leader", Handling rejection, criticism & failure", "Making choices", "Responsibility" and "Developing a positive body image."

In order for us to achieve great success we need the positive reinforcement from the power influence, the parents and care providers. We look forward to working with you!



## **Ivy Protégé Empowerment and Leadership AKAdemy Application Process**

**2009-2010**

1. Applicants are encouraged to type the application; however, we will also accept handwritten applications.
2. Applications must be received by **5:00 pm on Friday, July 18, 2009**. Late applications will not be accepted.
3. After your application has been received, you will be contacted so that we can set-up an interview (lasting approximately 20 minutes.)
4. At your interview, we will have the chance to get to know you better and answer any questions that you may have about the Program.
5. You can return your completed application in one of the following ways:
  - a. Via postal mail to the following address:

IOTA BETA OMEGA CHAPTER

ALPHA KAPPA ALPHA SORORITY INC.

P.O. Box 17452

Colorado Springs, CO 80935

Attn: Ivy Protégé Empowerment and Leadership AKAdemy



# Ivy Protégé Empowerment and Leadership AKAdemy

## APPLICATION

2009-2010

**Please print application legibly (no pencil please). Additional sheets may be used.**

Last Name	First Name	Preferred First Name	Middle Name
Address	City	Zip	Apt/Unit#
Home phone	Cell phone	Age	Date of Birth
Applicant's email address	Current School	School attending in Fall	Grade

**Attention: All applications must be received (not postmarked) in the Iota Beta Omega Chapter of Alpha Kappa Alpha Sorority Inc. mailbox by 5:00 p.m. Friday, July 18, 2009**

IOTA BETA OMEGA CHAPTER

ALPHA KAPPA ALPHA SORORITY INC.

P.O. Box 17452

Colorado Springs, CO 80935

Attn: Ivy Protégé Empowerment and Leadership AKAdemy

Phone: 574-2238



## **Please type answers to questions and attach to packet**

The Ivy Protégé Empowerment and Leadership AKAdemy wants to get know more about you as an individual. Please read the following questions very carefully so that you can give the best, most honest answer. Remember: **there are no wrong answers.** Please write all of your answers on a separate sheet of paper. All answers should be double-spaced and can be typed or handwritten. Your applications will not be shared with anyone except for the Members of Ivy Protégé Empowerment and Leadership AKAdemy. Please start early, think about it and be honest with your answers. Good luck!

### **Personal Information**

1. Using a few phrases or adjectives, describe yourself and include what is important to you.
2. What is unique about you?
3. Name three other characteristics you look for in other people and tell us why those characteristics are important to you.
4. If you could spend time with any current or past person who you consider a leader, who would you, choose and why do you consider this person a leader?
5. How do you see your community and how does your community see you?
6. Describe a time when your actions positively impacted a person, your family, your school or your community.
7. Describe an action that you have done that has made you proud of yourself and others proud of you.
8. What do you find is the most challenging issue facing young people today?
9. If you could volunteer to help your community in any way, what would you volunteer to do?
10. If you had to describe yourself in 3 words, what would those words be, and why? Please Explain.



**Follow-Up Questions:**

1. If accepted into IP, will you be able to provide your own transportation to and from sessions?

\*Note: Sessions begin promptly at 9:00am and end at 12:00 pm.

2. Are you involved in any other activities, programs, etc that will conflict with your attendance at IP Saturday Sessions? (please list all activities)



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

TO THE IVY PROTÉGÉ APPLICANT: This form is to be completed and submitted with your application to the Ivy Protégé Empowerment and Leadership AKAdemy.

**List Agencies in Which You (Applicant) are Involved**

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Name of Agency

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Contact Person

Phone Number

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Purpose of Involvement

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Name of Agency

---

Contact Person

Phone Number

---

Purpose of Involvement

---

Name of Agency

---

Contact Person

Phone Number

---

Purpose of Involvement

---





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

TO THE IVY PROTÉGÉ APPLICANT: This form is to be completed and submitted with your application to the Ivy Protégé Empowerment and Leadership AKAdemy.

**FAMILY/HOUSEHOLD MEMBERS**

Family Member 1:

_____	_____	_____
Name	Age	Gender
_____		
Type of Job/School/Grade	Relationship to Applicant	

Family Member 2:

_____	_____	_____
Name	Age	Gender
_____		
Type of Job/School/Grade	Relationship to Applicant	

Family Member 3:

_____	_____	_____
Name	Age	Gender
_____		
Type of Job/School/Grade	Relationship to Applicant	

Family Member 4:

_____	_____	_____
Name	Age	Gender
_____		
Type of Job/School/Grade	Relationship to Applicant	

Family Member 5:

_____	_____	_____
Name	Age	Gender
_____		
Type of Job/School/Grade	Relationship to Applicant	



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

TO THE IVY PROTÉGÉ APPLICANT: This form is to be completed and signed by your Parent or Legal Guardian and submitted with your application to the Ivy Protégé Empowerment and Leadership AKAdemy.

### **Other Relationships and Future Planning**

*TELL US ABOUT YOUR DAUGHTER'S PEER RELATIONSHIPS? DOES SHE SOCIALIZE PRIMARILY IN SCHOOL, IN THE COMMUNITY, IN CHURCH, ETC.?*

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*WHAT ARE YOUR DAUGHTER'S EDUCATIONAL AND CAREER PLANS?*

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*WHAT DOES YOUR DAUGHTER DO FOR FUN? HOBBIES? FAVORITE RECREATIONAL ACTIVITIES? INTERESTS?*

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*DOES YOUR DAUGHTER HAVE ACCESS TO TRANSPORTATION? PLEASE DESCRIBE HOW YOUR DAUGHTER GENERALLY TRAVELS.*

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TO THE IVY PROTÉGÉ APPLICANT: This form is to be completed and signed by your Parent or Legal Guardian and submitted with your application to the Ivy Protégé Empowerment and Leadership AKAdemy.

### EMERGENCY FORM

#### IP Applicant Information:

Name: \_\_\_\_\_  
Last First Preferred Name

Address: \_\_\_\_\_  
City Zip

Telephone: \_\_\_\_\_  
Home Cell

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

#### Mother/Guardian Information:

Name: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
City Zip

Telephone: \_\_\_\_\_  
Home Cell Work

#### Father/Guardian Information:

Name: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
City Zip

Telephone: \_\_\_\_\_  
Home Cell Work

#### Emergency Contact:

Name: \_\_\_\_\_  
Last First Relationship

Address: \_\_\_\_\_  
City Zip

Telephone: \_\_\_\_\_  
Home Cell Work



TO THE IVY PROTÉGÉ APPLICANT: This form is to be signed by your Parent or Legal Guardian and submitted with your application to the Ivy Protégé Empowerment and Leadership AKAdemy.

**PARENT/LEGAL GUARDIAN SIGNATURE**

**Due 5:00 p.m., Friday, July 18, 2009**

**\*Applicant will not be considered unless all forms are received by the deadline.**

**Medical Status**

1. Please describe any of the youth's medical problems, allergies and restricted activities.

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2. Has the youth received any mental health counseling? If so, please describe.

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3. Does your daughter take any medications for attention, mood or psychiatric issues (Example: Ritalin, Prozac)?

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Parent/Legal Guardian/Responsible Party: (Please print)

Signature of Parent/Legal Guardian/ Responsible Party

Date



TO THE IVY PROTÉGÉ APPLICANT: This form is to be signed by your Parent or Legal Guardian and submitted with your application to the Ivy Protégé Empowerment and Leadership AKAdemy.

**PARENT/LEGAL GUARDIAN PERMISSION/RELEASE FORM**

**Due 5:00 p.m., Friday, July 18, 2009**

**\*Applicant will not be considered unless all forms are received by the deadline.**

STUDENT NAME: \_\_\_\_\_

I am the parent/legal guardian of \_\_\_\_\_ (student name). I have read the information on the Ivy Protégé Empowerment and Leadership AKAdemy and am willing to have my child participate.

I understand attendance is **required** at the Meet and Greet. I understand if my child is unable to attend, she will be unable to participate in the IP program. I further understand the commitment required to participate in the Ivy Protégé Empowerment and Leadership AKAdemy and those students must be present at a minimum of 80% of the program activities.

I understand that the members of Iota Beta Omega Chapter of Alpha Kappa Alpha Sorority Inc will not provide transportation to the sessions or community activities.

I hereby release and hold harmless the Ivy Protégé Empowerment and Leadership AKAdemy members of Iota Beta Omega Chapter of Alpha Kappa Alpha Sorority Inc, or any individuals involved with planning, from any or all liability arising out of, or in connection with my child's participation in the programs sponsored by Iota Beta Omega Chapter of Alpha Kappa Alpha Sorority Inc This release form relates to accident, injury, illness or any damage whatsoever related to the above mentioned student's attendance at a or participation in any activity or session of the Ivy Protégé Empowerment and Leadership AKAdemy.

I acknowledge that I have carefully read this RELEASE from and that I am fully aware of the legal consequences of this agreement and agree to its terms and understand that I am waiving certain rights, and assuming the risk of damage from my child's participation in the programs sponsored by the Iota Beta Omega Chapter of Alpha Kappa Alpha Sorority Inc.

By signing this RELEASE, I acknowledge that I have read, understand and agree to the terms of this agreement.

\_\_\_\_\_  
Parent/Legal Guardian Name (Please print)

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date



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

TO THE IVY PROTÉGÉ APPLICANT: This form is to be completed and signed by your Parent or Legal Guardian and submitted with your application to the Ivy Protégé Empowerment and Leadership AKAdemy.

### GENERAL PHOTO RELEASE

I, \_\_\_\_\_ consent that any pictures taken of my daughter(s) in connection with the Ivy Protégé Empowerment and Leadership AKAdemy which may be used for publicity, promotion, videos, websites and the like without limitation and I, on behalf of my daughter(s), waive any rights to inspect or approve any finished product, including any written copy that may be created in connection therewith.

I, on behalf of my daughter(s) understand that I or my minor daughter (under the age 18) will not receive compensation for the use of this likeness in any form.

I, on behalf of my daughter(s) understand that I do not own the copyright of the photograph(s).

Description of program: the Ivy Protégé Empowerment and Leadership AKAdemy August 2009-May 2010.

By signing this release, I acknowledge that I fully understand its contents.

\_\_\_\_\_  
Parent/Guardian/Responsible Party Signature

\_\_\_\_\_  
Date

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