

# Kodiak Refuge Youth



# Leadership Program

## KRYL Program Application

Submit completed application by April 24, 2014.

(Drop off at the Kodiak Refuge Visitor Center or email to Michelle\_Lawson@gws.gov)

Name: \_\_\_\_\_ Grade in Fall 2014 \_\_\_\_\_

Mailing address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

In case of an emergency, name and phone number: \_\_\_\_\_

This program requires a volunteer commitment of up to 30 hours for one week in the summer. Schedule will typically be from 9am - 3pm Monday - Friday. Participants must have housing in the Kodiak community.

Is there any timeframe in the summer when you are unavailable to volunteer? If so, when? \_\_\_\_\_

Do you have a preferred week or age group that you'd like to volunteer with? \_\_\_\_\_

In a paragraph please state why you are interested in being a part of the Kodiak Refuge Youth Leadership Program and in what way you feel you can contribute to the success of Salmon Camp as a Salmon Camp instructor's aide?

Parent/Guardian Permission:

\_\_\_\_\_ has my permission to participate in the Kodiak Refuge Leadership Program.

Student's Name

\_\_\_\_\_  
(Signature of Parent/Guardian)

\_\_\_\_\_  
(Date)