

## Missouri Youth Leadership Forum Reference Form

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Section 1: (To be complete	ed by the applicant)		
Name: Email:			
Address:	City:	Zip Code:	
Phone:			
Section 2: (To the Reference	e)		
The Forum is a unique care	er leadership-training progi ith delegates are selected	ouri Youth Leadership Forum (Forum). ram for high school students with from their local communities to cultivate summer program.	
The goals of the Forum are	to:		
Promote inclusion of p	people with disabilities in all	with disabilities will realize their full potential. aspects of society. act young people with disabilities	
For more information on the http://disability.mo.gov/gc	·	Forum for Students with Disabilities visit	
Please complete the follow email, or mail to:	ing questionnaire on the ba	ack of this page. Please return by fax,	
The Governor's Co Email: <u>gcd@oa.r</u>	•	1668, Jefferson City, MO 65102. O9 Phone: 800-877-8249	
Name of Reference:	e of Reference: Position/Title:		
School / Firm / Organization	າ:		
City:	State: <i>ī</i>	Zip Code:	
Email:		Phone:	



2014.



Please mail/email this form after completing to the Governor's Council on Disability by April 1,

1.	How long and in what capacity have you known the applicant?		
2.	What are the applicant's strengths?		
3.	How does the applicant exhibit the following? Concern for others:		
	Responsibility:		
	Maturity:		
	Interaction with Peers:		
4.	What other leadership qualities do you see in the applicant in addition to those listed above?		
5.	We are looking for students who have leadership potential, and demonstrate involvement extra-curricular activities, community involvement, and the ability to interact effectively other students. Do you believe with the right supports and training this applicant has the potential to become a better leader and return to their community with a desire to make difference?		
6.	Additional Comments:		
Sig	nature of Reference: Date:		