**2022 Virtual Leadership Summit Application**

Virtual Event will be held on ***February 26, 2022***

***APPLICATION DEADLINE EXTENDED!!***

***Applications have to be submitted or postmarked by January 31, 2022***

Name: (First) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (M.I.) \_\_\_\_\_\_\_ (Last) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: \_\_\_\_\_ Birth Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Race (Optional) \_\_\_\_\_\_\_\_ T-Shirt Size\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expected Graduation Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please check the ones that apply:**

How did you learn about the Forum?

🞏 School 🞏 Friend 🞏 Internet/Email/Social Media 🞏 Transition Event 🞏 Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am a Vocational Rehabilitation (VR) or Rehabilitation Services for the Blind (RSB) Client

Yes  No  Don’t Know

I am a DMH Regional Office client.  Yes  No  Don’t Know

Have you participated at your local Center for Independent Living (CIL)?

Yes  No  Don’t Know

Please describe your disability

Primary Disability (medical diagnosis) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Onset of Disability (age): \_\_\_\_\_\_\_

Please check **all** that apply:

|  |  |
| --- | --- |
| Deaf / Hard of Hearing:  I use sign language  I use assistive listening devices  I use real time captioning  I use lip reading  I need interpreter services  I use note takers  Blind / Visually Impaired:  I read with Braille  I read with large print  I need assistance with mobility  I prefer electronic format  Mobility Disability (e.g. spinal cord injury, muscular dystrophy, other):  I use a wheelchair / scooter  I cannot walk upstairs  I use a walker, cane, or crutches  I cannot walk long distances  Immune Disability:  Crohn’s Disease  Rheumatoid Arthritis  Sickle Cell Anemia  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Autism * Asperger’s syndrome * Traumatic Brain Injury * Down Syndrome * Intellectual Disability * Mental Health Disability (e.g. anxiety, depression, bipolar/mood disorder, obsessive compulsive disorder, other) * Neuro/Muscular Disability * Learning Disability (e.g. dyslexia, dyscalculia, ADD/ADHD, other…)   \_\_\_Reading \_\_\_Math \_\_\_\_Written   * Multiple Disabilities * Chronic Illness (e.g. cancer, cystic fibrosis, diabetes, heart disease, other) * Chemical / Environmental Sensitivity * Other (describe)   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Please list all accommodations needed to participate in the Forum (interpreter, captioning, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**If unable to submit online you may email, fax, or mail your documents to:**

Governor’s Council on Disability

Missouri Youth Leadership Forum

PO Box 1668

Jefferson City, MO 65102

[rachel.rackers@oa.mo.gov](mailto:gcd@oa.mo.gov)

<http://disability.mo.gov>

Phone: 800-877-8249

Fax: 573-526-4109