



383 Michigan Street  
Saint Paul, Minnesota 55102

651-290-0542

www.sokolma.org

## Czech and Slovak Sokol Minnesota Youth Leadership Award Youth Leadership Award Application Form 2025

Date of Application: \_\_\_\_\_ Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_

1. Name of Applicant: \_\_\_\_\_

2. Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Month and Year of Birth: \_\_\_\_\_

### 4. Sokol Unit Membership -

Applicants and their parent(s) must be active members of Sokol to apply for the Award.

a. Name of parent or guardian is a member - Name: \_\_\_\_\_

b. If Applicant is a member then indicate: Youth or Adult (Adult membership age is 17.) If applicable, Year Applicant initiated as an Adult Member: \_\_\_\_\_

5. Parent/Guardian Name(s): \_\_\_\_\_

6. High School Attending: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

7. Current year in High School      Junior      Senior      8. Date of Graduation: \_\_\_\_\_

### 9. Attach Youth Activity Form signed by the adult director of the applicant's Sokol Minnesota youth activity(s).

Sokol Minnesota Youth Activities include *Taneční Teens* dancers, gymnastics, Czech & Slovak School Twin Cities, Sokol Minnesota Youth Link, or Czech and Slovak Children's Cultural Day Camp junior leader or teacher. **Only include activities in which you participated starting in Grade 6 and up.**

10. **Arrange for a letter of recommendation** from an adult leader directing the applicant's youth activities with Sokol Minnesota. Request the leader to send the letter by July 1 to the Review Committee at the address below.

11. **Attach signed Volunteer Form(s) from an adult leader verifying applicant's volunteer activities with Sokol MN. Only include activities in which you participated starting in Grade 6 and up.**

12. **Attach a Personal Essay** outlining their youth activity(s) and volunteer service to Sokol Minnesota and how the activity and service have impacted his/her life. **Essay 300 words maximum.**

13. **E-mail this completed form and all of the above attachments by July 1 to: YouthLeadership Award Review Committee: [YLA@sokolmn.org](mailto:YLA@sokolmn.org)**

**Here is a check list of the required criteria you need to have to qualify for the YLA.**

1	Applicant/Parent are Sokol Members in 2024 & 2025
2	Junior/Senior Year in School
3	Completed Application
4	Adult Leader Letter of Recommendation
5	Activities Form
6	Volunteer Forms
7	Essay

**Once you send the forms to [YLA@sokolmn.org](mailto:YLA@sokolmn.org) they will get forwarded to Louise Wessinger, and she will reply back to you to confirm that she received the forms. If you DO NOT hear from Louise that she received your forms within 5 days, please contact her at 651-271-3601 to meet the July 1 deadline.**

April 2024