

## Individual Youth Mentor Application

### **The Young Worker Leadership Academy**

*Presented by UCLA, UC Berkeley and*

The Commission on Health and Safety and Workers' Compensation

I am applying for the  UC Berkeley Academy (Jan 28-30, 2010)

UC Los Angeles Academy (Feb 25-27, 2010)

**Please type or print neatly in the space provided.**

#### Contact Information

Name (First and Last)		
Street Address		
City, State, Zip Code		
School/Organization		Grade
Home Phone	Cell Phone	Email

**Briefly answer the following questions below or on a separate page (one page only):**

1. Why are you interested in continuing your involvement with this project?

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2. What qualities do you have that will help you be a mentor to youth your age?

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3. Tell us about your work experience (paid or unpaid) or other community project(s) with which you have been involved:

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4. From the experience that you gained from working on your project, what would you like to share with other youth who will be doing their own projects?

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5. How will you manage your school/work and youth mentor responsibilities before and after the YWLA?

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6. You are required to participate in an all day training before the YWLA Academy to prepare.  
Please circle when you are available AND circle as many as possible

**Wednesday, the day before the YWLA starts**

**Saturday, the week before the YWLA**

**Saturday, 2 weeks before the YWLA**

**Agreement and Signature:**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

**Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**\*Return application by November 9, 2009 via mail, fax, or e-mail to:**  
**Nancy Morales**, UCLA-Labor Occupational Safety and Health Program  
**10945 Le Conte Ave., Suite 2107**  
**Box 951478**  
**Los Angeles, CA 90095-1478**  
**Phone:** 310-794-5996; **Fax:** 310-794-6403; **E-mail:** [moralesn@ucla.edu](mailto:moralesn@ucla.edu)

**Our Policy**

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest in our program.

*The Young Worker Leadership Academy is part of the Worker Occupational Safety and Health Training and Education Program (WOSHTEP). WOSHTEP is administered by the Commission on Health and Safety and Workers' Compensation in the Department of Industrial Relations through interagency agreements with the Labor Occupational Health Program at U.C. Berkeley, the Western Center for Agricultural Health and Safety at U.C. Davis, and the Labor Occupational Safety and Health Program at U.C.L.A. The Academy is also funded in part by a grant from The California Wellness Foundation and supported by the California Partnership for Young Worker Health and Safety*