



ROTARY YOUTH LEADERSHIP AWARD Districts 9700 & 9710 **Application Form**

Please PRINT clearly and attach pages with additional details as required.

APPLICANT DETAILS		
Title:	Surname	First Name:
Preferred Name:	Gender:	Date of Birth:
	M/F	/ /
Address:		
Suburb:	State:	Postcode:
Mobile Number:	Email Address:	
EMERGENCY CONTACT		
Name:		Relationship to Applicant:
Address:		
Suburb:	State:	Postcode:
Mobile Number:	Email Address:	
PERSONAL REQUIREMENTS		
For your safety, please provide information on allergies, health, or physical conditions: (If necessary, please provide further details and your health management plan on a separate page).		
For catering purposes, please provide specific dietary requirements (eg vegetarian, gluten free etc)		

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APPLICANT NAME:		
EDUCATION DETAILS:		
Highest education level achieved:		
Other Awards (e.g. Duke of Edinburgh, Lifesaving, First Aid, Cadets, Scouts, Guides):		
Community Involvement (e.g. Organisations in which you actively participate):		
EMPLOYMENT/STUDY DETAILS:		
Occupation:	Description of current study/job:	
Employer/Study Organisation:	Manager/Supervisor:	Contact Number:
Work Experience:		
Hobbies & Recreational Interests:		
From your research, describe how you feel you may benefit by attending RYLA:		
SIGNATURE		
		This application does not guarantee you a place on the D9710 RYLA programme. It is your responsibility to contact a Rotary Club in the district to sponsor your attendance at RYLA.
Signature of Applicant	Date	

Please **PRINT** clearly and attach pages with additional details as required.

APPLICANT NAME :		
ROTARY CLUB ENDORSEMENT		
<p>RYLA Participants <u>must</u> be sponsored by a Rotary Club in Rotary District 9710. (ACT and Southern NSW). Clubs should interview RYLA applicants prior to completing the following section. Please forward this application form ONLY to the District RYLA committee (see the Club Information and Checklist for contact details).</p>		
SPONSORING ROTARY CLUB DETAILS		
Sponsoring Rotary Club:	Name of Contact Rotarian:	
Club Position:	Email Address:	
Mobile Number:	Work Number:	Home Number:
Rotarian Signature signed on behalf of Rotary Club		Date
<p>By signing this completed section and returning it to the District 9710 RYLA Committee, you endorse the above applicant to participate in the District 9710 RYLA programme and agree to pay the attendance fee on invoice from the District Treasurer</p>		

RYLA COMMITTEE USE ONLY		
Application Received	Early Bird	Details Logged
Date:	YES/NO	YES/NO
Rylarian Confirmation Email	Club Confirmation Email	Forwarded to District Treasurer
Date:	Date:	Date:
Diagnostic Received		
Date:		
Comments		