



McHenry County Operation Snowball (MCOS)
Snowflake 2017 Leadership Application

Name: _____ School: _____ Grade: _____
Email: _____ Phone: _____

Use additional paper if necessary

Why would you like to be part of this leadership team?

List two personal strengths and two areas for improvement:

Describe a role model you look up to and why:

Briefly describe other activities you are involved with (in and out of school). Include previous leadership roles.

Explain your position on alcohol, tobacco, and other drug use. Be open and honest in your response.

What do you hope to gain as a member of the MCOS leadership team?

Participant Commitment:

I understand that if accepted as a McHenry County Operation Snowball leader, I will be seen as a role model in my community. I will display leadership qualities, promote the MCOS mission & values, and will participate in MCOS events.

Applicant Signature: _____ *Date:* _____

Adult Verification (Must be completed by a school administrator/teacher/counselor, or a community member):

I understand McHenry County Operation Snowball leadership participants are expected to demonstrate leadership potential, an interest in helping others, and a responsibility to self and others. I believe the applicant has an ability to influence peers in a positive way. I have seen no evidence that the applicant has a current alcohol/drug or behavioral problem, or that he/she has experienced school discipline/legal problems in the past six months. I understand that this is a prevention (not treatment) program:

Adult Signature: _____ *Date:* _____

Parent Approval: if under 18 years of age

I understand that my child is interested in become a leader with McHenry County Operation Snowball. I also understand that my child will be required to attend future events and will receive additional information if accepted.

Signature: _____ *Date:* _____