



CHANGING LIVES & STRENGTHENING FAMILIES
SINCE 1983

KFAM LEADERSHIP AWARD APPLICATION FORM

KFAM's Leadership Award Program is a celebration of young leaders who embody the spirit of service, compassion, and community impact. This program honors students who recognize that true leadership begins with giving – giving time, talent and heart to strengthen the communities around them.

DATE: _____

CONTACT INFORMATION			
NAME		DATE OF BIRTH	AGE
GENDER		EMAIL ADDRESS	
ADDRESS			
PHONE NUMBER		DRIVERS LICENSE	
<input type="checkbox"/> Citizen <input type="checkbox"/> Lawful Permanent Resident			
KFAM LEADERSHIP AWARD LEVEL			
Please select the level you are committing to for the year.			
<input type="checkbox"/> 14-18 Years Old			
<input type="checkbox"/> Bronze (50-74 Hours)			
<input type="checkbox"/> Silver (75-99 Hours)			
<input type="checkbox"/> Gold (100+ Hours)			
Have you applied to the program before?			
LENGTH OF COMMITMENT TIME			
<input type="checkbox"/> 1 Year (January 1- December 31)			



HOURS OF AVAILABILITY

Please provide specific days of the week, if known. Otherwise, provide generally how many hours you'd like to volunteer.

- ☐ Monday _____ to _____
- ☐ Tuesday _____ to _____
- ☐ Wednesday _____ to _____
- ☐ Thursday _____ to _____
- ☐ Friday _____ to _____
- ☐ Saturday _____ to _____

REQUIREMENTS/RULES

- 70% of hours must be completed with KFAM. 30% of hours may be completed at another organization within the 1-year time frame and must be verifiable.
- Must volunteer at least one KFAM event during the year.
- Brainstorm a volunteer opportunity for community members or event to engage community members. Optional: Execute plan.
- Must check in with Development Manager, Shana Lee, once a quarter to review progress. If 50% is not completed by August, advisors and volunteers will discuss lowering level standing or withdrawal from program.
- Only Gold Level Awardees and family will be invited to KFAM's annual gala to be presented award.
- Before the end of the term, please complete a testimonial on your experience at KFAM. (Will count towards volunteer hours.)
- Must complete background check.

PERSONAL GOALS

Please list any personal goals/skills you would like us to help you develop.

I acknowledge that I have read and understand the terms of KFAM's Presidential Volunteer Service Award Program. I hereby certify that all the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge.

Applicant Signature

Applicant Name

Date