

'Be the Change' Youth Training Program Scholarship Competition

The School-Based Health Alliance has a distinct training program just for youth at the National School-Based Health Care Convention, June 26-29, 2023. The 'Be the Change' Youth Training Program is designed to provide an opportunity for youth to connect with like-minded peers from around the country who are passionate leaders of change in their schools and communities. 'Be the Change' participants network with each other and school-based health care advocates at the convention and engage in various workshops pertaining to health, education, policy, and leadership.

There are a limited number of scholarships available for students. Scholarships will cover the cost of two nights' hotel accommodations for the duration of convention (check-in is on Monday June 26, and check-out is on Wednesday, June 28).

Rules

1. **Applicants must be registered for convention prior to submitting a scholarship application.**
2. Applicants must be nominated by an adult involved with school-based health centers.
3. Applicants must be between 14 to 18 years of age at the time of the Convention.
4. Applicants must get the permission of a parent and/or guardian to apply.
5. Applicants must submit their application, essay, transcript, and nominating form to School-Based Health Alliance by **Friday, May 19, 2023.**
6. Scholarship recipients must be able to attend the full convention from June 26- 28, 2023.
7. Scholarship recipients must attend all 'Be the Change' workshops at the Convention.

Scholarship decisions will be sent via email **Friday, May 26, 2023.**

If you have any questions regarding the scholarship competition, please e-mail youthadvisorycouncil@sbh4all.org or call (202) 370-4383.

Visit <https://www.youthhealthhub.org/be-the-change/> for more information about the 'Be the Change' Youth Training Program.

See pages below for further instructions and application forms.

Please return completed forms to youthadvisorycouncil@sbh4all.org



Nomination Form

For the School-Based Health Alliance’s ‘Be the Change’ Youth Training Program, professionals working in the field of school-based health care may nominate up to four students for this opportunity. Nominators should inform the chosen students and direct them to the application site. Once a student has agreed to submit an application, please complete this Nomination Form and submit with the completed application to the School-Based Health Alliance. **Note to nominators/chaperones bringing more than one youth:** An application must be submitted for every youth (up to four) that you would like to be considered for a scholarship. Hotel rooms are double occupancy and for scholarship recipients only.

The School-Based Health Alliance requires that any youth attending the convention be accompanied by an adult who is also attending the convention. The nominator does not have to be the same person as the chaperon, nor is the chaperon required to complete any Youth Program activities. The role of the chaperon is to coordinate travel to and from the convention, accompany the youth to the convention, and be responsible for them during non-convention hours. Please carefully consider this when deciding to nominate a student for this opportunity.

NOMINATOR SIGNATURE

I, the undersigned, hereby nominate _____ to apply for the School-Based Health Alliance’s Youth Program Scholarship Application. I believe that they would be a good candidate for this opportunity and can attest to their commitment to their school community, interest in health and/or education issues, and ability to satisfy the requirements of this scholarship.

(Print name)

(Phone Number)

(Signature)

(Email)

(Relationship to student)

Will you be attending the School-Based Health Alliance’s annual convention? YES _____ NO _____

If not, who will act as the student’s chaperon at the convention if they attend?
(Applies only to applicants under the age of 18)

NAME: _____

EMAIL: _____

PHONE: _____

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'Be the Change' Youth Training Program Scholarship Application (APPLICANT INFO)

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

SCHOOL NAME: _____

DOB (MM/DD/YYYY): ____/____/_____

PARENT/GUARDIAN SIGNATURE (If applicant is under the age of 18)

I, the undersigned, give permission for _____ (Applicant's name) to apply for the 'Be the Change' Youth Training Program Scholarship Competition. I understand that if they are awarded the scholarship they will need to attend the entire convention in Washington, D.C. from June 26-29, 2023, which may require a financial commitment beyond the School-Based Health Alliance's scholarship funds.

(Print Name)

(Phone Number)

(Signature)

(Email)

See below for essay questions.

ESSAY QUESTIONS

Please pick one (1) of the following prompts and create a 350 word essay. Essays can be submitted in text (typed, 12-pt font, double spaced) or audio/video form (3-5 minutes). *Note: If you create an audio or video essay, please submit your recording either as a link to your public media file (e.g., YouTube, SoundCloud, DropBox, OneDrive, Google Drive, etc.).*

- Discuss why it is important for youth to be active leaders in health and education movements.
- Describe how a school-based health center (SBHC) has impacted your life and your community.
- Discuss a health or education issue that you feel is most pressing for youth today, and how you would address that issue using an SBHC.

If submitting an audio/video, please provide the URL here:

TRANSCRIPTS

Please submit a copy of your most recent transcript (unofficial versions are acceptable). Grades and GPA will not be taken into account during the selection process; transcripts are only for enrollment verification.

Travel Information Form

Please complete the following form with information about your flights to and from Washington, D.C. for the 'Be the Change' Youth Training Program. The School-Based Health Alliance will arrange hotel accommodations for scholarship recipients and their chaperones.

Full name (as appears on ID):

Date of birth (MM/DD/YYYY):

Flight to Washington, D.C. on Monday, June 26

Airline:

Flight number:

Departure airport:

Departure time:

Arrival time:

Flight from Washington, D.C. on Wednesday, June 28 OR Thursday, June 29

Airline:

Flight number:

Arrival airport:

Departure time:

Arrival time:

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