



2025 Virginia Y.E.S.

July 10-13, 2025

APPLICATION

Instructions

1. Carefully read the information and instructions printed in this packet.
2. Be certain to include all attachments as requested, securely attach all extra documents
3. Sign under "Part VII: Signature," located at the end of the application.
4. Return this application as soon as possible, postmarked no later than **4/15/25**

Return postmarked application no later than 4/15/25 to:

Jaye Pearce, Virginia Y.E.S. Coordinator
5353 Rolling Hill Road • Red House, VA 23963
434-248-6151

vastateyes@gmail.com

PART I: Applicant Information

Name: _____ Nickname: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number 1: (____) _____ Home Work Cell

Telephone Number 2: (____) _____ Home Work Cell

Email: _____ Date of Birth: _____

Special Needs or Requirements: _____

Allergies or Food Restrictions: _____

Name of Parent(s)/Guardian(s) with whom you reside: _____

Parent Contact Information: (Please provide name beside phone number or email address)

Telephone Number 1: (____) _____ Home Work Cell

Telephone Number 2: (____) _____ Home Work Cell

Telephone Number 3: (____) _____ Home Work Cell

Email: _____

Email: _____

PART II: School Information

Applicant must currently be enrolled in an accredited or equivalent high school and **must currently be a freshman, sophomore, or junior with a minimum 3.0 GPA on a 4.0 scale**, unless there are extenuating circumstances.

Name of High School: _____

Address: _____

City: _____ State: _____ Zip Code: _____

School Counselor or Teacher who will act as a reference: _____

Telephone Number: (____) _____ Email: _____

Current Grade Level **as of April 1, 2025:** Freshman Sophomore Junior

Cumulative Grade Point Average (**unweighted**): _____ Class Rank: _____ of _____

Are there extenuating circumstances that have affected your GPA? Yes No

If yes, please explain (attach a separate piece of paper): _____

PART III: Extracurricular, Volunteer and Shooting Sports Activities

Attach to this application a list of extracurricular, community and shooting sports activities and hobbies you are involved in. Please list your activities and hobbies in the order of their interest to you. Include school and community clubs and/or associations, leadership positions held, awards received, etc. Also include the number of years you've been involved in the organization and your current and past roles.

PART IV: Transcripts

Attach official copies of transcripts. If you are home schooled, send notification of evaluation provided by the Board of Education, grades from an independent third-party source such as a licensed teacher, or grades from the student's family. For all transcripts and evaluations, send your last two academic school years along with any grades from the present year.

PART V: Essay

Attach to this application an **original** one page, hand written essay about, "***Why you would like to be selected as a participant in the Virginia Youth Education Summit***". This personal statement should be neat and legible.

PART VI: Recommendations

Please attach three letters of recommendation from any of the following: teacher, school administrator, clergy, employer, business owner, Scout or other youth group leader, community leader, politician, or outstanding member of the community. Do not use family members. Please ask them to complete the attached recommendation form before writing the letter. **Please submit the recommendations with application.**

PART VII: Signature

All applicants **must** sign and date the following to be considered.

I hereby certify that the above information is correct to the best of my knowledge and the essay is original work written by me. I understand that knowingly fabricating any information on this application may make me ineligible to participate in the Virginia Youth Education Summit (Y.E.S.) Program.

I understand that information provided on this application may be verified by the National Rifle Association of America and I authorize and request every person, firm, corporation, association, and/or agency having control of any documents, records, writings, or other information pertaining to me furnish to the NRA any and all such information the NRA believes will relate to my qualifications and/or fitness to participate in the Y.E.S. program, and to permit the NRA and any of its agents or representatives to inspect, copy, or otherwise record such information.

Signature

Date

Return postmarked application no later than 4/15/2025 to:
Jaye Pearce • 5353 Rolling Hill Road • Red House, VA 23963

STOP!

Before mailing, please be sure that you can answer Y.E.S. to the following questions:

- I have completed the Personal Information section.
- I have completed the School Information section.
- I have completed the Extracurricular Activities section.
- I have attached the required official transcripts/notification of evaluation
- I have attached my handwritten one page essay.
- I have attached the three letters of recommendation.

Return postmarked application no later than April 15, 2025 to:

Jaye Pearce

VA Y.E.S. Coordinator
5353 Rolling Hill Road.
Red House, VA 23963
434-248-6151
vastateyes@gmail.com

For questions about the Virginia State Y.E.S. program:

To
NRA Field Representative
1405 Fowlkes Road
Victoria, VA 23974
434-696-2189
<https://yes.nra.org/state-summits/>

How did you hear about the VA Y.E.S. program?

2025 Virginia State Y.E.S. General Information

Dates:

Thursday July 10th; Friday July 11th; Saturday July 12th; Sunday July 13th

Approved applicants will be notified by May 1, 2025. (Please include legible email, and telephone contact information on your application.) Students will receive a preliminary itinerary, with schedules, dress codes, and suggestions on how to prepare for the summit.

We will be staying in downtown Richmond

Students will arrive Thursday, July 10^h by 1:00p.m. for check in to event. Orientation will follow.

The Virginia State Y.E.S. program includes:

3 nights lodging in Downtown Richmond

All local transportation

All scheduled Y.E.S. meals and snacks (if student has special dietary needs, you must contact coordinator)

All program instruction, lectures, and discussions.

All planned sightseeing, entrance fees, and excursions.

Scholarships awarded to students. (Based upon original application, participation and evaluation)

Scholarship trip to Washington, D.C. awarded to a student during award presentation.

24 hour Chaperones

Not included:

Travel expenses to and from the Richmond area

Personal expenses (i.e. souvenirs, extra snacks)

Any additional room charges (i.e. room service)



2025 Virginia Youth Education Summit

Dear Sir or Madam,

Thank you for taking the time to complete a recommendation for the current Virginia Y.E.S. applicant. Letters of recommendation are an integral part of the entire Virginia Y.E.S. application. Therefore, your most earnest and observational thoughts on the student's qualifications are of quite importance on this portion of the application.

We have asked that the prospective Virginia Y.E.S. student give you as much time as needed to write a letter thoroughly examining and highlighting the applicant's strengths and weaknesses. Please note that students will not be judged on per se weaknesses; our purpose for the letters of recommendation is to give us insight and perspective on the applicant's judgment, dependability, interpersonal skills, attitude, and initiative. We hope to gain a clearer picture of the applicant with this portion of the application, in addition to his or her GPA and essay.

Please attach one letter of recommendation citing your understanding of the individual's qualifications for Virginia Y.E.S. Specific examples of behavior and acts of ambition are extremely beneficial to the applicant. More information about the Virginia Y.E.S. can be found at <https://yes.nra.org/state-summits/>. My contact information is listed below. Please do not hesitate to call if you have any questions.

Thank you,

Jaye Pearce
VA Y.E.S. Coordinator
434-248-6151
vastateyes@gmail.com

Contact Information for Letter of Recommendation:

Please provide your contact information, if it is not already notated in your letter of recommendation. This information is kept confidential. It will not be entered into a database or sold to third-party vendors.

Name: _____

Company: _____

Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: (_____) _____ Email: _____