

# ALASKA APPLICATION



## Instructions

1. Carefully read the information and instructions printed in this packet.
2. Be certain to include all attachments as requested.
3. Securely attach all extra documents by fastening them to the packet.
4. Include your full name on the upper left corner of all pages, including attachments.
5. Make sure all portions of the application are completed. *Incomplete applications will not be considered.*
6. A physical signature under "Part VII: Signature" is required.
7. Return this application as soon as possible, postmarked no later than **February 1<sup>st</sup>**.

**Return postmarked application no later than February 1<sup>st</sup> to:**

Ms. Joey Jigliotti  
10501 Shivalik Circle  
Anchorage, Alaska 99507  
Email:  
[joeyjigliotti@gmail.com](mailto:joeyjigliotti@gmail.com)  
Phone (907)242-2636  
FAX: (206) 350-7950

## PART I: Applicant Information

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone

Number 1: ( \_\_\_\_\_ ) \_\_\_\_\_ | Home | Work | Cell

Telephone Number 2: ( \_\_\_\_\_ ) \_\_\_\_\_ | Home | Work | Cell

Email: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**\*Please check your email inbox frequently for news and updates on your application.**

Name of Parent/Guardian with whom you reside: \_\_\_\_\_

Special Needs or Requirements: \_\_\_\_\_

**\* Participants will be required to take part in all Y.E.S. activities.**

## PART II: School Information

Applicant must currently be enrolled in an accredited or equivalent high school and **must currently be a sophomore, junior or senior (no exceptions) with a minimum 3.0 GPA on a 4.0 scale**, unless there are extenuating circumstances. **If your school does not use a 4.0 scale, please calculate and convert your GPA accordingly.**

Name of High School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School Counselor or Teacher who will act as a reference: \_\_\_\_\_

Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ Current Grade: | Sophomore | Junior | Senior

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

## 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: Personal Statement**

**Option 1:** Attach to this application a paragraph or more explaining why you are a good candidate for this year's Y.E.S. Please state why you should be selected, citing examples when necessary. Statement should be typed and no longer than one page.

**Option 2:** Produce a PowerPoint or video two to five minutes in length explaining why you are a good candidate for this year's Y.E.S. You may include photos, video, or any other multimedia in your statement. Please submit PowerPoint or video on CD or USB flash drive.

## **PART V: 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 (one if you're a sophomore) along with any grades from the present year. If possible, please keep official transcripts with application. **Do not send separately unless required by school.**

## **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 read the attached recommendation form before writing the letter. **Please keep 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 an original work written by me. I understand that knowingly fabricating any information on this application may make me ineligible to participate in the 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.**

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Signature

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Date

**Return postmarked application no later than February 1<sup>st</sup>**

**to:** Ms. Joey Jigliotti  
10501 Shivalik Circle  
Anchorage, Alaska 99507

Email: [joeyjigliotti@gmail.com](mailto:joeyjigliotti@gmail.com)

Phone (907)242-2636

FAX: (206) 350-7950 – Please include cover sheet if sending application by fax.

# Check List

**Before mailing or faxing, 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 completed my Personal Statement and it is attached to the application.
- I have attached the required official transcripts/notification of evaluation.
- I have attached the three required letters of recommendation.

**Return postmarked application no later than February 1<sup>st</sup> to:**

# Youth Education Summit Recommendation Form

Student's Name \_\_\_\_\_

Date: \_\_\_\_\_

Dear Sir or Madam,

Thank you for taking the time to complete a recommendation for the current Y.E.S. applicant. Letters of recommendation are an integral part of the entire 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 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 their 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 Y.E.S. Specific examples of behavior and acts of ambition are extremely beneficial to the applicant. The contact information is listed below. Please do not hesitate to call if you have any questions.

Thank you,

Event Support Coordinator  
Ms. Joey Jigliotti  
10501 Shivalik Circle  
Anchorage, Alaska 99507

Email: joeyjigliotti@gmail.com  
Phone (907)242-2636  
FAX: (206) 350-7950 – Please include cover sheet if sending application by fax.

## Letter of Recommendation: Contact Information

Please fill this section out with your contact information if it is not already noted 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: (\_\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

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City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_\_) \_\_\_\_\_

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Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_