



**YOUTH ENTREPRENEURIAL ACADEMY**  
**June 14 – 18, 2021**

**RECEIVE A \$500 SCHOLARSHIP**

**STUDENT APPLICATION FORM**

Priority deadline is **May 26, 2021**, or until full



# APPLICATION INFORMATION

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## WHAT IS THE YOUTH ENTREPRENEURIAL ACADEMY?

The Youth Entrepreneurial Academy is a unique opportunity for a motivated high school student like you. It's designed to provide you with the fundamental skills to start your own business and become an entrepreneur.

The Youth Entrepreneurial Academy consists of several components, including an evening orientation and a five-day academy in which you focus on the development of skills, knowledge, and attitudes of entrepreneurship.

Upon successful completion of the Youth Entrepreneurial Academy, you will be awarded a **\$500 Youth Entrepreneurial Academy Scholarship** if you choose to attend NIACC. This scholarship can also be used for summer or on-line classes at NIACC.

Up to \$3000 in scholarships are available to students enrolling in the Associate in Applied Science Entrepreneurship & Small Business Management Degree program at NIACC.

## PROCEDURE

1. You must complete the Youth Entrepreneurial Academy application form and return it to the John Pappajohn Entrepreneurial Center. Your application package will consist of:
  - \* A completed application form and statement of commitment, if selected
  - \* A self-evaluation of approximately 250 words.
  - \* A personal recommendation from a teacher, employer, or coach.
  - \* A statement of commitment from your parent(s) or guardian supporting your participation in the program.
2. You will participate in a personal interview.

3. The John Pappajohn Entrepreneurial Center will notify you regarding your participation in the Youth Entrepreneurial Academy.

## ELIGIBILITY

To be eligible, you must:

- \* Be a high school student.
- \* Have a history of achievement in academics, employment, or extracurricular activities.
- \* Plan to continue your education at a college or university after high school graduation.
- \* Be able and willing to commit to attending a five-day academy on the NIACC Campus.
- \* Have completed the Youth Entrepreneurial Academy student application form and participated in a student interview.

## SELECTION

Students will be selected based on a combination of the written materials submitted and the personal interview. Students will be assessed in the areas of:

- \* Innovation and creativity
- \* Leadership
- \* Motivation and interest
- \* Unique competencies or expertise

## BENEFITS

Academy enrollment includes:

- \* \$500 Scholarship
- \* Travel Expense paid
- \* Potential money to start business
- \* Access to Incubator Business space

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# APPLICATION FORM

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Please complete the following information.

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

Cell Phone: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

High School: \_\_\_\_\_

I am **currently** a high school:    freshman    sophomore    junior    senior    **(please circle)**

Extracurricular activities, outside interests, hobbies:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Career goal:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Work experience:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other areas of interest or specialization:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## STUDENT STATEMENT OF COMMITMENT

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I understand that if I am selected to participate in the Youth Entrepreneurial Academy, I will:

- Participate in an orientation session with a parent or guardian.
- Attend a five-day Youth Entrepreneurial Academy at NIACC.
- Make the necessary time and transportation arrangements to enable me to participate in this program.

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

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# SELF EVALUATION

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

Summarize your activities and accomplishments, in 250 words or less, with all comments addressed to the four areas of:

- Innovation and creativity
- Leadership
- Motivation and interest
- Unique competencies or expertise

Why are you interested in attending?

What business would you start if you were given \$1 million dollars?

Describe your future goals and how you plan to achieve them?

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

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# PERSONAL RECOMMENDATION

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(Examples: Teachers, Employer or Coach)

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

**I recommend this student be considered for the program. I believe the above student would be a successful and vested participant in the Youth Entrepreneurial Academy developed and sponsored by the NIACC John Pappajohn Entrepreneurial Center.**

Please address your comments to the four criteria:

- Innovation and creativity
- Leadership
- Motivation and interest
- Unique competencies or expertise

You may attach additional pages as appropriate.

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

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# PARENTAL STATEMENT OF COMMITMENT

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

**I understand that if my child is selected to participate in the Youth Entrepreneurial Academy, I will attend an evening orientation session with them.**

**I will support my child's participation in this program in whatever manner is appropriate and necessary.**

**My child has my support for the following reasons:**

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

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# PERSONAL CHECKLIST

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Before submitting your student application package for the Youth Entrepreneurial Academy, please check to see that you have completed all requirements.

- I have read all instructions on the application form and understand the requirements for participation in the Youth Entrepreneurial Academy.
- I have followed all the timelines.
- I have completed the application form.
- I have included my statement of commitment.
- I have included my self-evaluation essay.
- I have included my personal recommendation.
- I have included a statement of commitment from my parent(s).
- (Optional) I have included any additional supporting materials in an appendix. (No more than five pages.)

Signature: \_\_\_\_\_

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

It is the policy of North Iowa Area Community College to not discriminate on the basis of race, color, national origin, sex (including pregnancy), disability, age, sexual orientation, gender identity, genetic information, creed, religion, actual or potential parental, family and marital status or veteran's status in its programs, activities or employment practices as required by the Iowa Code sections 216.6 and 216.9, Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. § 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C. §§ 1681 – 1688), Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and the Americans with Disabilities Act (42 U.S.C. § 12101, et seq.).

Individuals having questions or complaints related to compliance with this policy should contact Shelly Schmit, EEO/AA Officer, 500 College Drive, Mason City, IA 50401 or via telephone at 641-422-4211. Inquires may also be directed to the Director of the Office for Civil Rights, U.S. Department of Education, Citigroup Center, 500 W. Madison, Suite 1475, Chicago, IL 60661, phone number 312/730-1560, fax 312/730-1576.