



Dear Interested Youth Advocate:

Enclosed is the application for the Youth Advocate member for the Operation Snowball, Inc. Board of Directors, youth and parent pledge, and "*Role of the Youth Advocate*" document. Please read thoroughly as it will help inform your decision to become involved in the Board.

Board meetings take place quarterly and are usually held Saturdays in Bloomington IL from 10am – 2pm. Both adult and youth Board members commit to attending meetings in person as they are the most effective, enjoyable and productive way to participate. There is the option to take part via conference call if travel is difficult. However, sitting on a phone for 3 to 4 hours is, quite frankly, tiring, full of distractions and not very fun.

Youth Advocates work side by side with adult Board members, take part in committee work, write articles for the OS e-newsletter, *Impact Your Community*, website *BLOG*, and post to our social media sites.

Youth Advocates are expected to demonstrate the drug- and alcohol-free lifestyle of Operation Snowball.

Once your application has been received, you will be contacted in order to set up an interview with the Youth Advocate Committee of the Board.

If you have question, please contact me at 217.528.7335 extension 16.

Sincerely,

A handwritten signature in black ink that reads "Ronald N. Jakubisin". The signature is written in a cursive style with a large, looping initial "R".

Ron Jakubisin
Director of Program Development
IADDA/Operation Snowball, Inc.



OPERATION SNOWBALL, INC.
The Role of a Youth Advocate Board Member

With the Board of Directors, develop policies to:

- Ensure Operation Snowball, Inc. meets the needs of Chapters and of groups interested in becoming Chapters;
- Operation Snowball, Inc. exists to serve people. The bottom line of every decision you make should be, "Will this decision make service to Chapters better?"

The Operation Snowball, Inc. Board of Directors will consist of a maximum of six youth advocates, nominated by their local Operation Snowball chapters.

Each youth advocate:

- Will have a minimum of one year Snowball experience.
- Will submit one letter of recommendation from Chapter's adult contact.
- Must be no younger than sophomores in high school and no older than 21.

Youth advocates appointed to the Board of Directors will:

- Maintain an equal partnership in roles and responsibilities as adult Board members including voting, except for all financial issues.
- Attend at least one-half (1/2) of all scheduled Board of Directors meetings.
- Serve a term of one year. At the conclusion of their term, they must be nominated for reappointment.
- Work in conjunction with the adult board member(s) in their region.
- Provide feedback regarding how board decisions effect students.
- Prepare presentations for conferences and/or trainings as a group.
- One of the six youth advocates will write an article for each issue of the *Impact* and website *Blog*.



Drug and Alcohol Free Youth Pledge

I _____, as an active member of the Operation Snowball, Inc. Board of Directors Youth Advocate's do swear to maintain and uphold the ideals of Operation Snowball, Inc.

I believe in the Operation Snowball program and its worth. I also believe in myself and my worth as an individual. Therefore, I now formally state my commitment to remain alcohol and drug free, year round. (This excludes any use for religious purposes.)

I recognize the fact that as a member of this group, my peers and others will be looking to me to set good examples. I also realize that this will not be an easy position to maintain, but I will always have the support of the Board of Directors members, the adult leaders and my parents.

Signature: _____ Date: _____

Parent Pledge

I _____, the parent/guardian of an active Operation Snowball Board of Directors member, pledge to support and encourage my child in this activity. I understand that making the commitment to be drug-free is a very difficult one, and I admire and respect my child's position.

Signature: _____ Date: _____



Application for Youth Advocate member of the Operation Snowball Inc. Board of Director

Adult Recommendation (this should be an adult associated with a Snowball that knows of your commitment, reliability, and your participation in Operation Snowball)

I, _____ *recommend* _____
(adult) (youth)
to become a Youth Advocate member of the Operation Snowball, Inc. Board of Directors.

Letter of Recommendation from Adult: please attach a one page narrative attesting to this youth's character and why they would make an excellent Youth Advocate for the OS Board.

The application and subsequent personal interview is based on the criteria which are listed below. Please keep them in mind as you complete the application as your responses should reflect these concerns:

1. Alcohol, tobacco, and other drugs (ATOD) free lifestyle.
2. Previous Operation Snowball experience
3. Attendance at Board meetings
4. Demonstrates leadership
5. Experience in group work
6. Responsibility
7. Dependability
8. Maturity
9. Non-judgmental
10. Non-prejudiced
11. Responsive to others

Interviews will be scheduled once your application is received.

Send your application with letter of recommendation and Pledge sheet to:
Operation Snowball, Inc.
937 S. 2nd Street Springfield, IL
62704



Name _____ Age _____

Address _____

City _____ Zip _____

Phone _____ Email _____

OS Chapter & School _____

How many Snowball events have you attended? _____

How many times have you served as Operation Snowball staff? _____

How long have you been involved with Operation Snowball? _____

Please answer the following questions. Please type your answers on a separate sheet of paper.

1. Describe the leadership qualities you possess which would be beneficial as a Youth Advocate Board Member.
2. What personal gains have you made as a result of being a part of Operation Snowball?
3. What would be your greatest strength as a Youth Advocate?
4. Board meetings are typically held Saturdays from 10am – 2pm in Bloomington IL. Are there any conflicts you might have throughout the year that would hinder your participation?
5. State your personal position about alcohol, tobacco and other drugs (ATOD) use/abuse. How is your position viewed by others?

PERSONAL STATEMENT: Explain why you wish to apply for a Youth Advocate position. Please feel free to add any further information you feel would be important in completing this application.