



OHIO TEEN INSTITUTE

LEADERSHIP CONFERENCE

June 9– 14, 2019

Heidelberg University, Tiffin, OH

ADULT STAFF APPLICATION

Support Youth in Their Choice in Wellness!!!

To qualify for Adult Staff, applicant must:

- Have a genuine interest in supporting teens in their prevention project efforts
- Be 21 years of age or 2 years out of high school
- Have no personal alcohol or other drug problems (if in recovery, at least one year of recovery)
- Be willing to commit to the entire event including staff training (staff training June 9th, conference June 10-14)
- Submit current BCI and FBI background checks prior to the conference

Application Deadline: Friday, March 1st, 2019

Send to:

Marion Crawford Prevention Programs
151 Campbell Street
Marion, OH 43302
Phone: 740-914-6444
Fax: 740-914-6610

Acceptance letters with further information will be mailed after April 1st.

Limited Adult Staff positions are available

Submission of an Adult Staff application does not guarantee acceptance as a member of the Staff.

Sponsored by the Ohio TI Planning Committee., a collaborative effort of T.I. supporters interested in providing positive T.I. training opportunities

Send with Application:
 Application Page
 Medical Form
 Workshop Proposal (optional)

2019 Ohio Teen Institute

ADULT STAFF APPLICATION

(PLEASE PRINT)

NAME _____

MAILING ADDRESS _____

CITY/STATE/ZIP _____ COUNTY _____

CELL PHONE _____ WORK PHONE _____

EMPLOYER _____

EMPLOYER/JOB TITLE _____

E-MAIL _____ GENDER _____

T-shirt Size: S M L XL 2XL 3XL 4XL

Experience working with high school students and/or Youth Led Prevention/Wellness Program:

Will you be bringing students from your area/program as participants? YES NO

Please mark your top preference for role:
 Family Group Co-Facilitator (must be 21+)
 Briefly detail your facilitation experience:
 (include above)
 Residence Hall/Security Team
 Are you willing to present a workshop?
 (If so, please submit workshop proposal – attached)

Please mark any supplemental role you would be willing to assist with:
 Community Building
 Water Games
 Game Night
 Spotlight Showcase

Please list any current certifications and/or licenses: _____

Statement of Commitment: I understand that as a member of the Ohio TI Adult Staff I agree to attend the entire Ohio TI Conference, participate in **all** scheduled activities including Staff Training and follow all rules deemed necessary for the success of the Ohio TI Conference. I also understand that I will be serving as a role model and must adhere to a high standard of conduct. As OTI is an abstinence based organization, I agree to remain tobacco, alcohol, and other drug-free during the Ohio TI Conference. In addition to my assigned role, I will commit to ensuring the safety of our youth by doing the following:

- Being present during large group presentations
- Assisting with evening headcount
- Helping to maintain and encourage positive behavior in line with a leadership conference
- Be willing to help and assist with additional activities as necessary

I have read the above and agree to follow these expectations.

 Signature of Adult Staff Applicant

 Date

2019 Ohio Teen Institute

MEDICAL & LIABILITY FORM

Adult Staff

(PLEASE PRINT)

NAME: _____

MEDICAL CONSIDERATIONS: (Asthma, Diabetes, Etc.) _____

CURRENT PRESCRIPTIONS & OTC MEDICATIONS: _____

SPECIAL DIETARY NEEDS & FOOD ALLERGIES: _____

IN CASE OF AN EMERGENCY CONTACT:

NAME _____ RELATIONSHIP _____ PHONE _____

NAME _____ RELATIONSHIP _____ PHONE _____

Please put initials in the space provided:

In the event that I experience a minor medical condition, such as headache, stomach ache, menstrual cramps, or other complaints that would not require medical attention, I give permission to be given the following:

_____ Aspirin _____ Tylenol _____ Ibuprofen _____ Benadryl
_____ Maalox _____ Other (please specify) _____

In the event of a medical emergency and all attempts to notify the persons above have been made, I hereby authorize the staff to provide emergency medical care. If further medical care is necessary, I give permission to be transported to a medical facility to be given appropriate medical treatment if that would be necessary due to the nature of the injury or illness. I hereby release and hold harmless the organizers, agencies, Boards, schools and agents of the Ohio Teen Institute Program from any and all liability from any losses, claims, expenses, actions, causes of action, cost damages and obligations (financially or otherwise) arising from any and all acts and unforeseen contingencies that result in injury or damage to property while participating in this event. I further understand that Ohio TI will not be held responsible for my negligence including, but not limited to, horseplay, frolicking and/or rule noncompliance/breaking. I hereby release and hold harmless the organizers, agencies, boards and agents from any and all losses, claims, expenses, actions, causes of actions, cost damages and obligations (financially or otherwise) arising from any and all acts and unforeseen contingencies that result in injury to persons or damage to property while participating in this event.

Signature of Adult Staff Applicant

Date

2019 Ohio Teen Institute

Workshop Proposal

(PLEASE PRINT)

Name: _____ Co Presenters: _____

Workshop Title: _____

Please provide a brief description of your workshop. This will be what students see when selecting workshops.

Workshop is for: (Circle all that apply) YOUTH INTERNS ADULTS

Preferred audience size: 20-25 25-35 35-45

Is this a single (45 minute) or double (90 minute) session workshop? SINGLE DOUBLE

Are you willing to present this workshop more than once? YES NO

Will you need any audio visual equipment? Yes No

If yes, please note what type of equipment is needed (i.e. projection screen, easel, overhead projector, etc) _____

Will you need internet access for your presentation? Yes No

What type of space would you prefer for your workshop?

Open Space Lecture Style Tables & Chairs Chairs

Other Comments:

An outline or synopsis of your workshop must be attached to this proposal.