



You have a voice and we want to hear it!

The Nebraska Youth Leadership Council (**NYLC**) is looking for young leaders who want to make a difference in Nebraska! This is your chance to strengthen your leadership skills and speak up for the issues that affect you! (NYLC is a program of the Nebraska Department of Education, co-sponsored by the Offices of Nebraska VR and Special Education.)

Mission Statement

NYLC was created by youth for youth. We are leaders and self-advocates who experience a disability. We promote disability awareness, leadership skills and self-advocacy for our peers on transitioning to college or work.

Please send the completed application and recommendation letter to:

Nebraska Youth Leadership Council
Attn: Jennifer Jones
Nebraska VR
PO Box 94987
Lincoln, NE 68509-4987

OR email all to: jennifer.jones@nebraska.gov

Applicants must:

- Be between the ages of 14-24;
- Have a disability;
- Have or want to learn leadership skills;
- Attend a monthly Zoom meeting and 1-2 in-person events per year. *

*Travel costs are reimbursed and hotel accommodations are provided when necessary.

For more information visit our website at: <https://nylc.nebraska.gov/>



Application

If you are interested in being a part of the NYLC, please complete this form and email or mail it to the address listed on the first page. (You may have help filling out the form if needed.)

Your Name: _____

Date of Birth: (To verify age eligibility) _____

Address: _____

City: _____ Zip Code: _____

Phone: _____ Email: _____

Parent/Guardian/Or Support Person: _____

Phone: _____ Email: _____

Please describe your disability and how it affects you:

Additional information required:

Please describe any leadership experience you have or why you would like to develop leadership skills. If you have a resume, please feel free to attach it also.

Include one letter of recommendation (below.) This letter must come from a person who is not a member of your family. Consider requesting a letter from a teacher, professional support staff, youth group leaders, employers, etc.

I hereby certify that the information I have given is true and correct to the best of my knowledge.

Signature

Date



Recommendation Letter

For the person making this recommendation, please complete about yourself:

Name: _____ Relationship to youth: _____

Phone: _____ Email: _____

Best time to contact you: _____

Below or attach a separate paper, please briefly describe why you believe this youth to be a good candidate for the Nebraska Youth Leadership Council.