
OREGON LEADERSHIP INSTITUTE

Application Form

Please complete the attached application form and return it to: Lida Rafia, Program Coordinator. Questions?
Call 971-722-7435 or email thrive@pcc.edu.

For deadline please check the OLI website at www.pcc.edu/OLI.

We will contact you after we receive your application to discuss your interest in the Oregon Leadership Institute.
We look forward to meeting with you soon. Gracias!

Submit high school transcript with this application.

Important! Your responses to the following questions are completely confidential. Please answer honestly and to the best of your ability. Your acceptance into the Oregon Leadership Institute will be based on whether you and the OLI coordinator feel that you will benefit from the program. Because of this, the OLI coordinator may contact you for an interview. Your responses to this application will help ensure that the sessions support your interests and needs.

Name: _____ **Birthday:** _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Home phone: () _____ **Work phone:** () _____

E-mail _____

Name, telephone and address of someone who will always know how to reach you: _____

Languages you speak (fluently or not): _____

Language(s) primarily spoken in your home: _____

Please tell us a little about your family, and the people you live with. Feel free to include what makes this person important to you.

NAME	LIVES WITH YOU (Circle one)	COMMENTS
Mother: _____	yes no	_____
Father: _____	yes no	_____
Guardian: _____	yes no	_____
Sisters: _____	yes no	_____
_____	yes no	_____
Brothers: _____	yes no	_____
_____	yes no	_____
Others: _____	yes no	_____
_____	yes no	_____

Name of school you are attending now: _____

Current grade level in school: _____ **Current GPA:** _____ *(this will not affect your acceptance into the OLI program)*

Year you expect to graduate from High School: _____

It is important for us to know you—not just your name and where you go to school—but who you are as a person, what matters to you, your dreams and hopes, and where you want support to accomplish your life goals. Please use the following questions to write about yourself in as much detail as you feel comfortable using. This application is confidential. Your answers will be read by the Site Coordinator in order to get to know you better. From time to time, other OCHA staff may read the applications in order to ensure that the OLI program is serving the needs of the students.

What do you most enjoy about high school (favorite subjects, special programs, friends)?

What are you planning to do after graduating from high school? If you don't know your plans, please write about what you would like to do after you leave school.

Please write about your dreams for your future. Be positive and pretend that there are no obstacles in your way!

What do you think is unique about you?

What are your values? What do you stand for?

Write three important decisions you have had to make in your life, and why are they important to you:

1.

2.

3.

What changes have you made in your life that you are proud of?

What do you wish was different about your life and yourself?

What are the things about life which you most fear or worry about? These concerns could include “barriers” you feel you have to overcome to accomplish what you would really like to do.

Please tell us what you want to gain from your participation in OLI. Please include any questions you’d like to have answered.