



## STUDENTS INSIDE ALBANY CONFERENCE APPLICATION FORM

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

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Preferred methods of contact: ☐ cell ☐ text message ☐ email ☐ home phone

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**1. What is your current career goal/idea?**

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**2. How interested are you in the following areas?**

**Very Interested (VI)                      Not Very Interested (NVI)                      Somewhat Interested (SI)**

- |   |       |
|---|-------|
| a. Learning about New York State's Legislative Process? | _____ |
| b. Meeting with your state legislator?                  | _____ |
| c. Touring the State Capitol?                           | _____ |
| d. Meeting students from other parts of the state?      | _____ |

**3. List your community and school activities including sports:**

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**4. Tell us why you feel we should choose you to attend the Students Inside Albany Conference? (Attach as a separate page. Include your name, email & phone #)**

**5. References (2 are required)**

**Reference One**

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

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

**Reference Two**

Name: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

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

**6. A signed letter of recommendation/nomination. (OPTIONAL -- counts as a reference)**

**ALL MATERIAL MUST BE RETURNED TO:**  
**LEAGUE OF WOMEN VOTERS OF ROCKLAND COUNTY BY February 14, 2024**  
**PO BOX 203 SLOATSBURG, NY 10974**  
**845-709-8243 (VOICE AND TEXT MESSAGES)      SIARCLWV@GMAIL.COM**