



The Virginia Department of Education's *I'm Determined* project in conjunction with the Partnership for People with Disabilities invites applications for sponsorship to the Fourth Annual *I'm Determined* Youth Summit at the Stonewall Jackson Hotel in Staunton, Virginia. Youth with disabilities from across the Commonwealth will meet to identify ways to become better advocates and lead more self-determined lives. The selected individuals and a parent/guardian will receive paid registration, hotel accommodations, travel expenses and meal reimbursements for the two day event. A concurrent Parent Summit for the selected participant's parent/guardian will be held at the hotel. The Youth Summit will start on Monday, November 15 at 10am, and will end on Tuesday, November 16, at 2:45 pm. More detailed information regarding the Youth Summit and Parent Summit will be provided upon acceptance of the youth. **Deadline for submission of applications is Friday, October 1, 2010.** Selected youth will be notified by Friday, October 15, 2010. Please indicate a phone number and an email address for youth (over 18) or youth's parent (under 18). **NO ACCEPTANCE LETTER WILL BE MAILED.** Accepted youth or youth's parent will be notified by phone call and/or email.

LOCATION:                      The Stonewall Jackson Hotel  
   24 South Market St.  
   Staunton, Virginia 24401

For information about past Youth Summits:  
[www.imdetermined.org](http://www.imdetermined.org)

Application Criteria:

- Young person with a disability, 14 years and older
- Young persons under age 18 **must** have a parent/guardian attend

Application Instructions:

- Complete the application form (essay included)
- Submit applications by email, fax, or postal mail by October 1, 2010.

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Questions? Contact Kim Sheridan at (540) 831-7159.

**Application**

**NAME OF APPLICANT** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**APPLICANT'S TELEPHONE NUMBER** \_\_\_\_\_

**APPLICANT'S E-MAIL** \_\_\_\_\_

**APPLICANT'S AGE** \_\_\_\_\_

**APPLICANT'S SCHOOL**  
(if applicable) \_\_\_\_\_

**EMERGENCY CONTACT NAME** \_\_\_\_\_

**RELATIONSHIP TO YOUTH** \_\_\_\_\_

**EMERGENCY CONTACT NUMBER** \_\_\_\_\_

**ACCOMMODATIONS NEEDED FOR YOUTH TO PARTICIPATE (For example: accessible hotel room, toileting assistance, interpreter)**

\_\_\_\_\_

**DIETARY NEEDS (For example: gluten-free, vegetarian, straws, assistance with eating)**

\_\_\_\_\_

***PARENT/GUARDIAN INFORMATION: YOUTH UNDER 18 OR YOUTH OVER 18 WHO PLAN TO HAVE THEIR PARENT/GUARDIAN ATTEND***

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**TELEPHONE NUMBER** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**YOUTH ESSAY**  
**(MUST BE SUBMITTED WITH APPLICATION)**

Everyone has a unique story; every story is important. We'd like to hear yours. Please respond to the following questions. You may submit a written OR a video response. If you are submitting a video response, it **MUST** be on a DVD and clearly labeled with your name, address and school and mailed along with your application.

- How has having a disability impacted your life? Some areas to cite may include - but are not limited to - personal and social, academic (school), goal-setting and independent living. What strategies do you use to help you in areas of challenge?
- Explain a point in your life where you were forced to make some hard decisions about how you viewed and dealt with your disability. Please discuss the process of reflection you went through, the decisions you made and the results of those decisions.
- How do you demonstrate and use self-determination in your life? Cite examples from academic (school) and personal areas of your life.

**WRITTEN RESPONSE: BETWEEN 300 - 1000 WORDS, DOUBLE SPACED,  
12 POINT FONT**

**Please type or write on a separate sheet and attach with this application**  
**VIDEO RESPONSE: EACH QUESTION MUST BE THOROUGHLY ANSWERED.**

Did you participate in the Youth Summit in Roanoke in March 2010?

Have you participated in the Youth Leadership Forum?  
If so, what year(s)?

Did you participate in any other youth related conferences?