

*Na Gaisgich Òga | The Young Heroes Program 2019 - 2020*

Am Foirm-iarrtais |Application Form

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| **Name of Applicant** |  |
| **Gender**  |  |
| **Date of Birth** |  |
| **Mailing Address** |  |
| **Street Address** |  |
| **Email** |  |
| **Phone** |  |
| **What school do you attend?**  |  |
| **Are you a resident of Nova Scotia?** |  |
| **Parent/Guardian Name** |  |
| **Parent/Guardian Phone** |  |
| **Parent/Guardian Email Address** |  |

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| Applicants must provide one reference person (not a relative) who can speak to their involvement in Gaelic language and cultural activities. Our selection committee will be contacting this person. |
| **Reference Person** |  |
| **Reference Person Phone Number &****Email Address** |  |

Questions for the Applicant Youth are asked to fill in this application with the assistance of their parents or guardians.

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| 1. Provide a short description of your involvement to date with the Gaelic language and culture. Include any classes and programs you have participated in, or other ways you’ve been exposed to the culture.
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| 2. What do you think is important and special about the Gaelic? |
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| 3. How do you plan to pass on the Gaelic language and culture to others?  |
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| 4. How has your family and community helped you to learn Gaelic or exposed you to Gaelic culture? |
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| 5. Do you currently attend a public school in Nova Scotia that offers Gaelic programming? If yes, are you enrolled in Gaelic classes?  |
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| 6. If accepted, how do you plan to continue with language and cultural learning between our weekend sessions? |
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| 7. What do you like to do in your free time? For example: sports and physical activities, computers/media, video games, music, social activities, dance, arts & crafts, etc.  |
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| 8. Applicants must also provide a short video or audio recording (approximately two minutes long), where they introduce themselves in Gaelic and share some Gaelic phrases / words they know. Appllicants may then describe in English, why they wish to be in the program. Videos and recordings can be submitted to Colin MacDonald via email, colin@gaeliccollege.edu, or sent to Colaisde na Gàidhlig | The Gaelic College in a private message via Facebook Messenger.9. If you seek financial support, please provide the following additional letters: * A brief letter explaining why you are deserving of this support.
* Two reference letters

If you have any questions regarding the application process or require technical assistance please contact Colin: colin@gaeliccollege.edu or 1-902-295-3411  |

Parents and Guardians:

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| I certify to the best of my knowledge that the information provided in this Youth Application is true and accurate. I give my informed consent and permission for my child to participate in “Na Gaisgich Òga” and its related activities, and will ensure he/she attends all weekend sessions and mentoring visits. |
| **Parent/Guardian Name** |  |
| **Date** |  |
| **Parent/Guardian Signature** |  |

**Deadline: August 30, 2019**

**Applications must be emailed to:**

**Colin MacDonald**

**Gaelic Director**

**Colaisde na Gàidhlig | The Gaelic College**

**Phone: 1-902-295-3411**

**colin@gaeliccollege.edu**