2014-2015

State of Alaska - DHSS

Women's, Children's & Family Health

Adolescent Health

[YOUTH ALLIANCE FOR A HEALTHIER ALASKA]

Enclosed you will find an application for 2014-2015 YAHA membership. The State of Alaska is seeking 14 young people (ages 14-18) from across Alaska that are dedicated, resourceful, and creative, to advise the Alaska Division of Public Health on issues affecting teens such as substance abuse, violence, suicide, injury, teen pregnancy, nutrition, and fitness. Members will also collaborate on a community action project. The completed application, materials, and a letter of recommendation are due March 14, 2014 no later than 5:00 p.m. to the WCFH office (by hand delivery, mail, fax, or email).



Our mission: The Mission of the Youth Alliance for a Healthier Alaska is to advise the Adolescent Health Program and other health programs in Alaska, and to create

interventions designed to improve the lives of adolescents in Alaska.

Who we are: We are a group of diverse, energetic teens ages 14-18 from across Alaska. We are interested in health and are enthusiastic about shaping how our state responds to youth issues that we all experience.

2013-2014 Members:

Alyssa, 17, Dutch Harbor Satchel, 16, Barrow Madelyn, 15, McGrath Megan, 15, Palmer Annemarie, 17, Anchorage Amanda, 15, Unalaska Christian, 17, Dutch Elana, 16, Anchorage

Weston, 16, Barrow Sherrie, 16, Anchorage

What we can do: In the 2013-2014 session, we want to help make decisions, provide insight, and give advice on a wide spectrum of adolescent health topics. We will review materials created for teens by various health programs and will serve as a review committee before materials are designed or distributed. We also will be partnering with community organizations in the creation of a community action plan to address a youth related challenge that our home towns and villages may be struggling with.

Why listen to us? Youth voice is critical to the success of any program or intervention targeting young people and we are trained to give professional and constructive advice.

What we're doing: We meet once a month throughout the school year. We have served as a focus group for a dating violence prevention campaign, a teen drinking campaign, a suicide prevention organization, the tobacco prevention program and others.

To see us in action and benefit from our expertise, contact us to schedule yourself into one of our monthly meetings!

Get in touch with us: Email or call Jennifer Baker, Adolescent Health Program Coordinator in the Department of Health and Social Services, Section of Women's Children's and Family Health: jennifer.baker@alaska.gov OR (907) 269-4517



Application for the: Youth Allíance for a Healthíer Alaska

YOUTH ALLIANCE FOR A HEALTHIER ALASKA

Complete applications (pages 3-6) must be received by: March 14, 2014 at 5:00 p.m. (please hand deliver to our office, mail to the address below, fax, or scan and email).

Name:	Date of Birth:	
Address:		
City, State, Zip		
Race/Ethnicity		
School:		
Year in School (2014-2015 school year):		
□ Freshman □ Sophomore □ Junior	\Box Senior \Box Other	
Home Phone:	Cell Phone:	
Emergency Contact Name:		
Shirt size:		

Meeting Attendance:

Attending meetings is mandatory. Will you be able to attend meetings in Anchorage or call into a toll free telephone/video conference one Saturday per month beginning September 6th, 2014 (excluding holidays) from **12:00-3:00 p.m.** until May 3, 2015?

Please circle: Yes or No

If no, what could get in the way? How often would you miss meetings?_____

How will you get to meetings? (for those in the Anchorage area ONLY- Please let us know if you need help)______

Will you be able to meet in person in Anchorage for a 1.5 day training on Saturday and Sunday, September 6-7, 2014 (all expenses paid)? *This meeting will require you to travel with an adult guardian to Anchorage either on Friday evening or first thing Saturday morning before 8:00 a.m. and depart on Sunday, September 7, 2014.*

Please circle: Yes or No

Please write, cartoon, draw, perform (and record), or creatively answer the questions below. (Please attach up to one sheet or if you chose to record, send a 3-5 minutes recording for each question below.)

1. Why are you interested in serving on the Youth Alliance for Healthier Alaska? (Example: I'm interested in improving teen health because...)

2. What qualities and/or experiences do you have that would benefit the group? (Example: I can speak more than one language, have experience with health issue, involved in state system, creative, etc.)

3. What are two issues that young people face in your community that you feel need to be addressed and why?

4. What are three of your strengths that will help the YAHA committee? (Example: I am able to get along well with others, etc.)

Youth: By signing below, I agree to participate in YAHA for one year and miss no more than one meeting. I will do my best to act as an positive ambassador for YAHA and the Division of Public Health.

Youth Signature

Date

Parent/Guardian: My signature affirms that I am aware and supportive of my child's application to the Youth Alliance for a Healthier Alaska. I have read the one page informational flyer and I understand what will be expected of my child. I understand that I will need to accompany my child or assign a guardian to travel with my child for the first meeting in Anchorage on September 6-7, 2014. I agree with his/her time commitment and transportation plan. Parent comments:

Parent/Guardian Signature	Printed Name	Telephone Number(s)
Parent Email Address	Would you like to receive email updates on your youths progress this year? Circle Yes or No	
Date		

Completed application (pages 3-6) are due no later than Friday, March 14, 2014 at 5:00 p.m. (please hand deliver to our office, mail to the address below, fax, or scan and email to the address below)

To: Youth Alliance for a Healthier Alaska ATTN: Jennifer Baker Alaska Division of Public Health Women's, Children's & Family Health 3601 C Street, Suite 322 Anchorage, AK 99503 Fax: 907 269-3465 Phone: 907 269-4517 jennifer.baker@alaska.gov Name:_____

Relationship to Applicant:______(must be an adult other than the applicant's parent or guardian)

Please write a letter addressing the applicant's strengths and why he/she would be an asset to the Youth Alliance for Healthier Alaska (YAHA). YAHA is a group of community minded teens that takes action on issues that affect their community. YAHA advises the Alaska Division of Public Health on issues affecting teens such as substance abuse, violence, suicide, injury, teen pregnancy, nutrition, and fitness.

Sponsoring Adult Signature

Telephone

Date

Email Address