

(HOME)

(WORK)

(MOBILE)

SCHOOL INFORMATION

School: _____

Grade: _____

How much time can you commit to the programme?(Please specify in hours per week) _____

Please describe any youth clubs/projects/volunteer work with which you were/are involved (include dates, length of time and positions held).

	Name of club/project/programme	Date		Position Held
		From (MM/YYYY)	To (MM/YYYY)	
1.				
2.				
3.				
4.				
5.				

Please list any awards or special accomplishments

	Awarding Institution	Date		Awards/Special Accomplishment
		From (MM/YYYY)	To (MM/YYYY)	
1.				
2.				
3.				
4.				
5.				

Tell us what you know about substance abuse in Jamaica.

ADDITIONAL REQUIREMENTS

Each applicant is required to submit a personal plan (250 - 300 words) and applications must be accompanied by two (2) recommendations from any of the following:

- Principal or Vice Principal;
- Guidance Counselor;
- Senior Teacher;
- Pastor;
- Head of an NGO;
- Senior member of the Jamaica Constabulary Force (Sergeant, Inspector or Superintendent);
- Justice of the Peace;
- Head of a recognized Professional or Service Organization.

By signing below, you confirm that the information you have provided is true and accurate. You agree that you will work with the National Council on Drug Abuse to promote its programmes.

Applicant

Name: _____ **Signature:** _____ **Date:** _____

Parent/Guardian

Name: _____ **Signature:** _____ **Date:** _____

Completed forms, essays and recommendations can be submitted via email or mail to:

yllaward@ncda.org.jm

OR

**National Council on Drug Abuse
2-4 Melmac Avenue, Kingston 5**