



YOUTH LEADERSHIP GREGORY-PORTLAND APPLICATION

A program in partnership with GPISD, The Portland Chamber of Commerce & the Leadership
Portland Alumni Association

Applications will be accepted starting May 1, 2026 and must be submitted by: **September 4, 2026**. Class fee of \$100 due to the Portland Chamber by Session 1. Applications may be submitted either by mail or in person to the following location:

Portland Chamber of Commerce
720 Dallas St., Ste. A
P.O. Box 388
Portland, TX 78374

PERSONAL DATA: (Please type or print neatly.)

First Name: _____ Last Name: _____

Preferred name for name badge: _____ Grade: _____

Mailing address: _____

E-Mail: _____ Home Phone: _____ Cell: _____

Essay

Please attach an essay (minimum of 100 words) about what you would like to do for your community in the future as a leader.

Additional Comments: _____

Extra-curricular Activities (in school):

Activities in community:

Highest leadership position held and/or honors received (K-Current) _____

Volunteer experience:

Describe the leadership qualities you believe you possess:

What do you consider your most important achievement so far? _____

What do you consider your greatest strength? _____

What do you consider your weakness? How could you change that into strength? _____

What do you think are the characters of a good leader? _____

What do you hope to gain from your experience in this program? _____

Future Plans _____

LETTER OF COMMITMENT

STUDENT COMMITMENT:

If selected as a participant in the Youth Leadership Portland, I commit to:

- Participate completely in all days of the program dates.
- Arrange my own transportation to and from events, when school bus is not provided
- Certify that all information provided in this application is complete and correct. I understand any false information will disqualify me from participating in the program.
- Possess passing grades and be in good standing with the school.
- As a student participant in the Youth Leadership program at the Portland Chamber of Commerce, I grant permission for my photograph to be taken and used for program-related purposes.

Student's Printed Name: _____ Date: _____

Student Signature: _____

Student's Email: _____ Student Cell: _____

PARENT COMMITMENT:

As the parent of the applicant, I agree to ensure my child meets all the above-mentioned requirements for participation.

Parent's Printed Name: _____ Date: _____

Parent's Signature: _____

Parent's Email: _____ Parent Cell: _____