



Inland Valley Hope Partners Youth of Hope Corps

Mission Statement: The mission of Inland Valley Hope Partners, a collaboration that brings together faith communities, businesses, individuals and community groups is to ensure empowerment of people in need by providing food, shelter and supportive services.

Purpose:

The purpose of the Inland Valley Hope Partners Youth of Hope Corps is

- To provide 8-10 committed and motivated youth volunteers the opportunity to be ambassadors for Inland Valley Hope Partners.
- To mobilize and motivate young people to take action in their own community
- To enhance and develop the lives of the community youth

Meetings:

- Members are expected to be present at monthly meetings that are held at the Inland Valley Hope Partners administrative offices in Pomona.

Responsibilities:

- Act as an advocate for youth in the community
- Provide a youth voice on hunger and poverty issues
- Work as a team to address hunger and poverty issues relating to youth in the community
- Assist in planning, promoting and implementing of programs and services for youth
- Prepare recommendations for the board regarding outreach to youth
- Foster a greater involvement of youth in agency partnerships

Qualifications:

Members must be 9th-12th graders residing in the 13 communities served by Inland Valley Hope Partners. Members must demonstrate a strong interest in and commitment to the purpose and goals of Inland Valley Hope Partners.

Deadline:

Applications must be received by May 9th 2011. Please return to the address or email below.

Inland Valley Hope Partners

Attn: Amy Modglin

1753 N Park Ave

Pomona, CA 91768

OR

Amym@hope-partners.com

Staff Contact:

Amy Modglin

Faith Relations Associate

909.622.3806 x242

amym@hope-partners.com



Youth of Hope Corps Reference Form

Applicant: _____

Inland Valley Hope Partners would appreciate your assistance in providing us with the following information. We thank you in advance for your time and cooperation.

Name of Reference: _____

Company/School Name: _____

Address: _____ City/State/Zip code _____

Telephone: _____

E-mail Address: _____

Please rate the following categories below that pertain to your current knowledge of this applicant.

CHARACTER

	Below Average	Average	Good	Very Good	Excellent
Demonstrates integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exercises self discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Polite and considerate of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMPETENCY

	Below Average	Average	Good	Very Good	Excellent
Demonstrates critical thinking skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates effective verbal skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Possesses leadership skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMITMENT

	Below Average	Average	Good	Very Good	Excellent
Determined and persistent in challenging situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates follow-through	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependable and reliable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COOPERATION

	Below Average	Average	Good	Very Good	Excellent
Accepting of diverse populations and events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work as a team member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Values individual's perspectives and potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any additional information you would like to share about the applicant?

Reference (Signature): _____

Date: _____