



Young Philatelic Leaders Fellowship

Senior Fellow (Age 18–25) Application Form



| | | | | |
|---|--|-----------------------------|----------------|----------|
| Last Name | | First Name & Middle Initial | | Date |
| Home Address: No. & St. or P.O. Box | | | | |
| Town or City | | State/Province | | ZIP Code |
| Birth Date | | E-mail Address | | |
| Home Phone Number | | Cell Phone Number | | |
| High School or College Name | | | | |
| Address: No. & St. or P.O. Box | | Town or City | State/Province | ZIP Code |
| School Website | | School Phone Number | | |
| Name of current English Teacher or Academic Advisor | | E-mail Address | | |
| Your Stamp Collecting Interest(s) _____ | | | | |

REFERENCES

Please give two references (one must be a teacher)

| | | | |
|--------------|-----------------------------|--------------|--------------|
| 1. _____ | | Teacher | |
| Last Name | First Name & Middle Initial | Relationship | Subject |
| Address | | | |
| Town or City | State/Province | ZIP Code | Phone number |
| 2. _____ | | | |
| Last Name | First Name & Middle Initial | Relationship | Subject |
| Address | | | |
| Town or City | State/Province | ZIP Code | Phone number |

ESSAY QUESTIONS

Please attach an essay about your interest in stamp collecting to assist the Selection Committee in determining your potential as a Fellow. Your essay should include: What influenced you to begin stamp collecting? What do you consider one of the best things about stamp collecting? What is your favorite stamp and why? What would you hope to gain from being a fellow?

EMERGENCY CONTACT INFORMATION

| | | |
|---|-----------------------------|-------------------------------|
| Last Name | First Name & Middle Initial | Relationship |
| Address (if different from child's address) | | |
| Town or City | State/Province | ZIP Code |
| E-mail Address | | |
| Home Phone Number | Cell Phone Number | Work Phone Number & Extension |

FELLOW AGREEMENT

I, _____, hereby agree to release, indemnify and hold harmless the American Philatelic Society, its officers, directors, employees, agents, and representatives of and from any claims, actions, proceedings, liability, costs and expense arising in any way out of or resulting from my participation in the Young Philatelic Leaders Fellowship (YPLF) program.

I understand that I will be matched with an adult mentor as I participate in the Young Philatelic Leaders Fellowship. I understand that the program will pay for my travel, accommodations, and meals.* I give my permission to be photographed and the images used for promotional material and media coverage.

I agree to complete the two-year Senior Fellow YPLF program, including attendance at all YPLF events and the completion of assignments. I understand that I will be a role model for Junior Fellows as they complete their YPLF assignments. I agree to not use drugs or abuse alcohol during my involvement in the program and will proudly represent the American Philatelic Society at all YPLF events and functions. I understand that if I fail in my agreement, that I may be dropped from the YPLF.

* The program will pay the costs for the lowest available fare purchased 30 days or more in advance.

| | |
|----------------------|------|
| Applicant Signature | Date |
| Witness Signature | Date |
| Witness Name Printed | |

**Please return completed applications to:
American Philatelic Society — YPLF
100 Match Factory Place
Bellefonte, PA 16823**