#### 2011 YOUTH LEADERSHIP PROGRAM

#### **Candidate Information**

The FBI National Academy Associates, Inc. (FBINAA), an organization comprised of law enforcement professionals who are graduates of the FBI National Academy, Quantico, Virginia, is offering to qualified **incoming high school sophomores and juniors** (AGES 14–16) who have demonstrated above average academic standards (3.0 or higher on a 4.0 scale), as well as good citizenship, the opportunity to participate in a eight day program of leadership development at the FBI Academy facility in Quantico, Virginia

This exciting program is offered through the cooperation of the FBI, and individual participants are selected and sponsored by the various state chapters of the FBINAA, who will pay transportation and student sponsorship fees. This year, participants will also be included from our sister organizations, including LEEDA, NEIA, and the Society of Former Special Agents of the FBI. Further, the counselors and instructional staff for the program consist of National Academy graduates who are members of the FBINAA and select FBI Special Agent personnel. Guest lecturers in various professional disciplines also address the students.

Although the program is not limited to young persons interested in a future career in law enforcement, interested candidates should possess a desire to gain knowledge of the American system of criminal justice, police organization and function, criminal law, the structure and operation of our criminal courts, as well as leadership skills and personal development. Upon successful completion of the program and **final exam** graduates of the program may be eligible to apply for 3 college credits.

This year's session of the Youth Leadership Program begins <u>June 22, 2011</u> with arrival at Reagan Airport in Washington, D.C., and will conclude on <u>June 30, 2011</u> with departure from Reagan Airport in Washington, D.C.

The program is open to males and females. Qualified young people are encouraged to complete the application, including the necessary signatures, and to submit the forms to the designated FBINAA Chapter Youth Leadership Program Representative by the due date of **MARCH 15**, **2011**. The Chapter must make selection and submission of all required material to the FBINAA Executive Office by **APRIL 15**, **2011**.

Application forms are available thru the FBINAA Chapter Youth Leadership Program Contacts.

## **2011 YOUTH LEADERSHIP PROGRAM**

#### APPLICATION

Name:	(M/F) Age	(DOB)
Address:	E-mail:	
City:	State: Zip Co	ode:
Telephone: Area Code ()	Cell Phone: (	
School:	City:	State:
Grade in the Fall of 2011:		
Employment:	City:	State:
Name(s) of Parent(s) or Legal Guardi	an(s):	
Address:	City:	State:
Telephone: Area Code ()	Cell Phone: (	
Name of Employer:	Telephon	e: (
E-mail:		
What do you expect to gain from atter	nding the Youth Leadership Program?	
Applicant's Signature:	D	ate:
Print Name:		

#### ATTACH RECENT PHOTO HERE

#### **January 2011 Parental Consent**

I UNDERSTAND MY SON/DAUGHTER WILL BE ATTENDING THE YOUTH LEADERSHIP PROGRAM AND EXCEPT WHILE TRAVELING ON A COMMERCIAL AIRLINE OR CONVEYANCE, WILL BE UNDER THE CONSTANT SUPERVISION OF A MEMBER OF THE FBINAA, Inc. WITH THIS UNDERSTANDING I APPROVE OF HIS/HER PARTICIPATION IN THIS PROGRAM. I FURTHER CERTIFY THAT HE/SHE IS MEDICALLY AND PHYSICALLY FIT TO PARTICIPATE IN ALL PROGRAM REQUIREMENTS. I UNDERSTAND THAT SHOULD MY SON/DAUGHTER LEAVE THE PROGRAM PRIOR TO COMPLETION I AM RESPONSIBLE FOR COSTS INCURRED BY THE SPONSORING FBINAA CHAPTER AT THEIR DISCRETION.

Parental/Guardian Signature:	Date:
Print Name:	
Emergency Telephone Number: ()	(IMMEDIATE RESPONSE)
Emergency Contact Name:	
List any physical limitations or medical problems of the son/dat	ughter that staff must be aware of:
A Medical Release Form (YLP Form 04) will be required pr	ior to acceptance to the program.
(To be completed by Sponsoring FBINAA, Inc. Chapter)	
Return Completed Application to:	
President:	
FBINAA Chapter:	
Street Address:	
City:	
State: Zip Code:	
FRINA A Chapter Submission Deadline: April 15, 2011	

Applications received after this date will not be accepted.

## 2011 YOUTH LEADERSHIP PROGRAM

#### MEDICAL INFORMATION/RELEASE FORM

**Required Information** 

Name	DOB			
Address	DOB City Cell Phone		_State	Zip
Home Phone	Cell Phone	e-mail		
BINAA Sponsoring Chapte	er			
	VER ALL QUESTIONS. IF NOT APP ty, sight, hearing or speech etc. If so wou			
List any medical problems e taking:	emergency personnel should be aware of a	nd <b>any medicat</b>	ions the st	udent is presently
List all allergies:				
	ald be unable to communicate with medicanedical history and ailments:	al personnel, list	specific in	formation they
	EMERGENCY NOTIFIC	ATIONS		
In case of emergency, please		1110115		
Name	Relationship	Phon	e	
Nomo	Relationship	Phone	)	
In the event of any sudden i	illness or medical emergency occurring to			
In the event of any sudden i grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I wil		information to e on/daughter afte	mergency or reasonab	or medical personne ly diligent efforts t
In the event of any sudden is grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I will carry it at all times while t	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my s Il personally fill out the "File of Life" p	information to e on/daughter afte acket and I wil	mergency or r reasonab l instruct	or medical personne ly diligent efforts t my son/daughter t
In the event of any sudden i grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I wil carry it at all times while t Signature	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my s Il personally fill out the "File of Life" p araveling to, from and at the program.	information to e on/daughter afte acket and I wil	mergency or r reasonab l instruct	or medical personne ly diligent efforts t my son/daughter t
In the event of any sudden i grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I wil carry it at all times while t SignatureSTATE OFSTATE OF	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my s ll personally fill out the "File of Life" paraveling to, from and at the program.  Relationship	information to e on/daughter afte acket and I wil	mergency of reasonable instruct	or medical personne ly diligent efforts t my son/daughter t
In the event of any sudden is grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I will carry it at all times while to Signature  STATE OF  COUNTY OF  The foregoing was acknowled.	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my s ll personally fill out the "File of Life" paraveling to, from and at the program.  Relationship	information to e on/daughter afte acket and I wil	mergency of reasonable instruct	or medical personne ly diligent efforts t my son/daughter t
In the event of any sudden is grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I will carry it at all times while to Signature	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my sell personally fill out the "File of Life" peraveling to, from and at the program.  Relationship	information to e on/daughter afte acket and I wil	mergency or reasonab  I instruct  _Date	or medical personne ly diligent efforts t my son/daughter t
In the event of any sudden is grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I will carry it at all times while to Signature	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my sell personally fill out the "File of Life" peraveling to, from and at the program.  Relationship	information to e on/daughter afte acket and I wil	mergency or reasonab  I instruct  _Date	or medical personne ly diligent efforts t my son/daughter t
In the event of any sudden is grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I will carry it at all times while to Signature  STATE OF COUNTY OF The foregoing was acknowled By Notary Public  I have read the Youth	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my state of Life" paraveling to, from and at the program.  Relationship	ommission Expin  ATION  activity requiphysically fit t	mergency or reasonable instruct in the contract of the contrac	or medical personner de diligent efforts to my son/daughter to my son/
In the event of any sudden is grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I will carry it at all times while to Signature  STATE OF COUNTY OF The foregoing was acknowled By  Notary Public  I have read the Youth including the 4.25 mile USN	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my state of Life" program.  Relationship	ommission Expination to e on/daughter after acket and I will will be acket and I will	mergency or reasonable instruct in a contract in the contract	or medical personned by diligent efforts to the my son/daughter to t
In the event of any sudden is grant the FBI/FBINAA full and 2) perform any necessa notify me have failed. I will carry it at all times while to Signature  STATE OF COUNTY OF The foregoing was acknowled By  Notary Public  I have read the Youth including the 4.25 mile USN	illness or medical emergency occurring to authority to 1) release the above medical ary medical emergency treatment to my state of Life" paraveling to, from and at the program.  Relationship	ommission Expination to e on/daughter after acket and I will will be acket and I will	mergency or reasonable instruct in a contract in the contract	or medical personned by diligent efforts to the my son/daughter to t

2011 YLP - Form 04

### 2011 YOUTH LEADERSHIP PROGRAM

ESSAY – "What is Leadership"

	(Use other side if necessary)	
Signature:	Print Name:	
2011 YLP – Form 05		

#### WAIVER OF LIABILITY FOR MINORS UNDER THE AGE OF 18 TRAINING aboard MARINE CORPS BASE, QUANTICO, VIRGINIA

We hereby request that our child,	, be permitted to
take part in the [name of organization]	
hereinafter the "Organization", sponsored activity to be held on Marine Co	orps Base (MCB), Quantico,
Virginia. I understand that participation in this activity will involve account	ess to Marine Corps training
areas. I understand the following four cautions with regard to these MC	CB Quantico ranges and
training areas: first, all such ranges and training areas are designed for	and used by the Marine
Corps for training its personnel in the deadly art of individual and unit c	ombat; second, these ranges
and training areas have been subject to countless live fire exercises and	may well contain a variety of
unexploded ordnance which, if triggered by or during my child's preser	nce on the ranges/training
areas, could result in serious bodily injury or death to my child; third, th	nese ranges and training
areas contain manmade or natural obstacles, some of which may be hidd	len, which could cause my
child to stumble, fall, and otherwise suffer serious bodily injury or death	ı; <b>fourth</b> , range and training
area conditions are often aggravated by the weather such that extreme he	eat, humidity, cold, wind, or
wet will increase the likelihood of physical danger and my child's expos	sure to serious bodily injury,
sickness, accident or death. Finally, I understand that the activities may	involve use of live
ammunition and weapons by both instructors and students who have var	ying levels of proficiency in
the use of weapons and tactics. I further understand that this activity i	may cause injuries
associated with physical fitness training like muscle sprains or strains, te	endon pulls, dislocation of
joints, broken bones, and injuries accompanying physical contact with o	ther participants, in addition
to the inherent dangers associated with environmental conditions. Obse	rvation of and/or
participation in this activity are inherently dangerous and could rest	uit in property damage as
well as serious bodily injury or death to my child and to others.	

Nonetheless, and in spite of my full knowledge of the risks involved in the Organization Sponsored Activity, I EXPRESSLY AND KNOWINGLY, FREELY AND VOLUNTARILY, ACCEPT AND ASSUME ALL RISKS INVOLVED IN AND ASSOCIATED WITH ALL ASPECTS OF THE ORGANIZATION SPONSORED ACTIVITY. I EXPRESSLY AND KNOWINGLY FREELY AND VOLUNTARILY WAIVE ANY AND ALL RIGHTS I/MY CHILD MAY HAVE TO RECOVER FOR ANY INJURY MY CHILD SUSTAINS, OR FOR THE DEATH OF MY CHILD, AND I AGREE TO HOLD HARMLESS THE UNITED STATES GOVERNMENT, THE DEPARTMENT OF DEFENSE, THE DEPARTMENT OF THE NAVY, THE UNITED STATES MARINE CORPS, THE MARINE CORPS COMBAT DEVELOPMENT COMMAND, AND MARINE CORPS BASE QUANTICO.

Therefore, in consideration of the privilege to participate in the Organization sponsored activity, to be held aboard MCB Quantico, I, the undersigned person, do hereby freely and voluntarily, and intending to be legally bound, accept all risks associated with the Organization activity, or any use I

may make of MCB Quantico, or government equipment or facilities in furtherance of my child's
participation in the Organization sponsored activity, and waive any and all rights to any claims or
demands or any other actions whatsoever, including those attributable to negligence, for damages,
due to accident, injury, or death, resulting from my child's participation in the Organization
sponsored activity for myself, my spouse, my parents or guardians, my heirs, executors,
administrators, or legal representatives of my estate, or anyone else on my behalf, which I may have
against any of the following: the United States of America, the Department of Defense, the
1/2 1
nitials Date

# WAIVER OF LIABILITY FOR MINORS UNDER THE AGE OF 18 TRAINING aboard MARINE CORPS BASE, QUANTICO, VIRGINIA

Department of the Navy, the United States Marine Corps, Marine Corps Combat Development Command, Marine Corps Base Quantico, or any and all individuals assigned to or employed by the United States, to include but be not limited to, the Secretary of the Navy, the Commandant of the Marine Corps, the Commanding General of the Marine Corps Combat Development Command, or the Commander of Marine Corps Base Quantico, in their official and personal capacities, or any medical personnel assigned thereto, or their representatives, successors, or assigns. I understand that the above language means I have abandoned any rights I may have, or any rights anyone associated with me may have, through legal or friendship or family ties, to sue the federal government for any injury my child may sustain because of participation in or attendance at the Organization sponsored activity that results in any damage whatsoever to my/my child's property or in the event of my child's death. By signing this document, I acknowledge that the federal government, or any agency or employee thereof, is not liable for any injury my child may sustain, to include death, as a result of my child's participation in the Organization sponsored activity. By signing this document, I effectively and completely assume all risk associated with the Organization sponsored activity. This document shall remain in effect and be held until notice of cancellation is received by the Commander, Marine Corps Base Quantico.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT, THAT I AM FULLY AWARE OF THE RISKS INVOLVED IN THIS ACTIVITY, AND THAT I VOLUNTARILY ACCEPT AND ASSUME THE RISKS ASSOCIATED WITH SUCH ACTIVITY.

Lastly, I understand that should I decline to execute this Waiver of Liability, my child will not be permitted to participate in the Organization sponsored activity to be held aboard MCB Quantico.

Printed Name of Mother/Father/Legal Guardian (circle of	one)
Signature of Parent/Legal Guardian	Date
On behalf of:	
Printed Name of Minor Child	Date
Emergency Point of Contact	Phone Number
Health Insurance Coverage. Please initial the appropriat	e box:
No, I do not have health insurance Yes	s, I do have health insurance (continue below)
Name of Insurance Provider	Policy #

#### **SESSION 13-FBINAA YOUTH LEADERSHIP PROGRAM**

June 24 – July 1, 2010

(Last Year's Curriculum - 2011 Curriculum Not Finalized, Yet)

#### **CURRICULUM SCHEDULE**

Date/Time	Activity	Instructor	Location	Dress
Monday, 6/21	G. Hendry Arrive Instructors/ Counselors Arrive		FBI Academy	
Tuesday, 6/22	Instructor/ Counselors Arrive		FBI Academy	
Wednesday, 6/23	Instructor Orientation	G. Hendry and Staff	Classroom FBI Academy	Casual
Thursday, 6/24	Day 1 Students Arrive Program Starts	All Instructors/Counselors	Reagan Airport FBI Academy	Staff in Uniform Students Travel
Friday, 6/25	Day 2 Program	Program Schedule	FBI Academy	YLP Uniform
Saturday, 6/26	Day 3 Program	Program Schedule	Washington, D.C.	YLP Uniform
Sunday, 6/27	Day 4 Program	Program Schedule	FBI Academy	YLP Uniform
Monday, 6/28	Day 5 Program	Program Schedule	FBI Academy	YLP Uniform
Tuesday, 6/29	Day 6 Program	Program Schedule	FBI Academy	YLP Uniform
Wednesday, 6/30	Day 7 Program	Program Schedule	FBI Academy	YLP Uniform
Thursday, 7/1	Day 8 Graduation	Program Schedule	FBI Academy Airport	Dress & Travel Attire
Friday, 7/2	Counselor Debriefing Departure	All Counselors and Instructors	FBI Academy	Travel

Day 1 Thursday, 6/24				
Date/Time	Activity	Instructor	Location	Dress
10:00 – 5:00 pm	Student Arrivals and Airport Pickups	All Instructors and Counselors	Reagan Airport FBI Academy	YLP Uniform Shirts
5:00 – 7:00 pm	Travel/Dinner ID Photos & Registration	All Students and Counselors/Instructors	FBI Academy	Travel Attire
7:00 – 900 pm	Orientation and Introductions – Group Assignments	G. Hendry All Students and Counselors/Instructors	FBI Academy Classroom	Appropriate Casual
9:00 – 9:30 pm	Students/Counselor Debriefing	All Students and Counselors/Instructors	FBI Academy	Appropriate Casual
9:30 pm	Lights Out			

Day	2
Friday,	6/25

111ddy, 0/23				
Date/Time	Activity	Instructor	Location	Dress
5:30 am	Wake-Up	All		
5:45 - 6:45 am	Physical Training	All	FBI Academy Gym	YLP Gym Uniform
6:45 – 7:45 am	Breakfast Photo ID	All	Main Cafeteria	YLP Uniform
8:00 – 9:00 am	Greetings and overview	Steve Tidwell G. Hendry	Classroom	YLP Uniform
9:00 – 11:00 am	Academy Tour	Tidwell FBI Staff	Academy Grounds HRT Firing Range	YLP Uniform
11:00 – Noon	Leadership	G. Hendry	Classroom	YLP Uniform
Noon – 1:00 pm	Lunch	All	Main Cafeteria	YLP Uniform
1:00 – 3:00 pm	Financial Responsibility	JFCU Kenny	Classroom	YLP Uniform
3:00 – 5:00 pm	Goal Setting	J. Rikala	Classroom	YLP Uniform
5:00 – 5:45 pm	Dinner	All	Main Cafeteria	YLP Uniform
6:00 – 8:30 pm	Accountability and Responsibility	K. Atwood	Classroom	YLP Uniform
8:30 – 9:30 pm	Student Counseling Session/Book Study Time	All Counselors and Students	FBI Academy	YLP Uniform
9:30 pm	Lights Out			

Day 3 Saturday, 6/26				
Date/Time	Activity	Instructor	Location	Dress
5:30 am	Wake-Up	All		
6:00 – 6:45 am	Breakfast	All Counselors and Instructors	FBI Academy	YLP Uniform
7:00 am	Depart FBI Academy by Bus	All Counselors and Instructors	Bus Ride	YLP Uniform
8:00 am – 6:00 pm	Tour Washington DC	All Counselors and Instructors	Memorials, Government Tours	YLP Uniform
6:00 – 7:30 pm	Dinner	All Counselors and Instructors	Washington, D.C.	YLP Uniform
7:30 – 8:30 pm	Depart Washington, D.C. and Return to FBI Academy	All	Bus Ride	YLP Uniform
8:30 – 9:30 pm	Book Report Study Period	All Students/ Counselors / Instructors	FBI Academy	YLP Uniform
9:30 pm	Lights Out			

Day 4 Sunday, 6/27					
Date/Time	Activity	Instructor	Location	Dress	
5:30 am	Wake-up	All			
5:45 - 6:45	Physical Training	All	FBI Academy	YLP Gym Uniform	
7:00 – 7:45 am	Breakfast	All	Main Cafeteria	YLP Uniform	
8:00 – 10:00 am	Juvenile Violence	R. Tyler	Classroom	YLP Uniform	
10:00 – Noon	Leadership	G. Hendry	Classroom	YLP Uniform	
Noon – 1:00 pm	Lunch	All	Main Cafeteria	YLP Uniform	
1:00 – 5:00 pm	Police Organization	J. Foster	Classroom	YLP Uniform	

All Students/

Counselors/

Instructors

ΑII

Αll

5:00 – 6:00 pm

6:00 – 7:30 pm

7:30 – 9:00 pm

9:30 pm

Dinner

**Book Report** 

Study Period

**Sports Activity** 

Lights Out

Main Cafeteria

FBI Academy

FBI Academy Gym

YLP Uniform

YLP Gym Uniform

YLP Gym Uniform

Day 5 Monday, 6/28				
Date/Time	Activity	Instructor	Location	Dress
5:30 am	Wake-Up	All		
5:45 – 6:45 am	Physical Training	All	FBI Academy Gym	YLP Gym Uniform
7:00 – 7:45 am	Breakfast	All	Main Cafeteria	YLP Uniform
8:00 – Noon	The Law and Its Effects	Lyddy	Classroom	YLP Uniform
Noon – 1:00 pm	Lunch	All	Main Cafeteria	YLP Uniform
1:00 – 5:00 pm	Leadership in Police Organizations	Fakkema	Classroom	YLP Uniform
5:00 – 6:00 pm	Dinner	All Counselors and Instructors	Main Cafeteria	YLP Uniform
6:00 – 7:30 pm	Book Report Study Period	All Students/ Counselors/ Instructors	FBI Academy	YLP Gym Uniform
7:30 – 9:00 pm	Sports Activity	All	FBI Academy	YLP Gym Uniform
9:30 pm	Lights Out			

Day 6
Tuesday, 6/29

i desday, 0/25				
Date/Time	Activity	Instructor	Location	Dress
5:30 am	Wake-Up	All		
5:45 – 6:45 am	Physical Training	All	FBI Academy Gym	YLP Gym Uniform
7:00 – 8:00 am	Breakfast	All	Main Cafeteria	YLP Uniform
8:00 – 10:00 am	Time Management Organizational Skills	John Forquer	Classroom	YLP Uniform
10:00 – Noon	Leadership Communication Ethics and Decision Making	Davis	Classroom	YLP Uniform
Noon – 1:00 pm	Lunch	All	Main Cafeteria	YLP Uniform
1:00 – 3:00 pm	Leadership Styles and Ethics	Suzanne Hasnay	Classroom	YLP Uniform
3:00 – 5:00 pm	Ethics, Integrity and Decision Making	Gannon	Classroom	YLP Uniform
5:00 – 6:00 pm	Dinner	All	Main Cafeteria	YLP Uniform
6:00 – 6:30 pm	Yellow Brick Road Briefing	All	Classroom	YLP Uniform
6:30 – 8:00 pm	Book Report Study Period	All Students/ Counselors/ Instructors	FBI Academy	YLP Gym Uniform
8:00 – 9:30 pm	Sports Activity	All	FBI Academy	YLP Gym Uniform
9:30 pm	Lights Out			

Day 7					
Wednesday, 6/30					
Date/Time	Activity	Instructor	Location	Dress	
5:30 am	Wake-Up				
5:45 – 6:45 am	Physical Training	All Counselors and Instructors	FBI Academy	YLP Gym Attire	
7:00 – 7:45 am	Breakfast	All	FBI Academy	YLP Uniform	
8:00 – 10:00 am	Media and Presentation Skills	Parrish	Classroom	YLP Uniform	
10:00 am – Noon	Book Reports	All	Classroom	YLP Uniform	
Noon – 12:45 pm	Lunch	All	Main Cafeteria	YLP Uniform	
1:00 – 4:00 pm	Yellow Brick Road	All Counselors and Instructors	USMC Facility	YLP Running Attire	
4:00 – 5:00 pm	Book Reports	All	Classroom	YLP Uniform	
5:00 – 6:00 pm	Dinner	All Counselors and Instructors	Main Cafeteria	YLP Uniform	
6:00 – 8:00 pm	Book Reports/ Final Exam Program Critique	All w/Staff	Classroom	YLP Uniform	
8:00 – 9:30 pm	Packing Lights Out	All	FBI Academy	YLP Uniform	

Lights Out

Day 8 Thursday, 7/1					
Date/Time	Activity	Instructor	Location	Dress	
5:30 am	Wake-Up	All			
6:00 – 7:00 am	Final Packing and Breakfast	All	FBI Academy	Dress Attire	
8:00 – 8:30 am	Photographs	All Students, Counselors and Instructors	Main Auditorium	Dress Attire	
8:30 - 8:45 am	Alumni Information	G. Hendry and John Velasco YLP Graduate	Main Auditorium	Dress Attire	
9:00 – 11:00 am	Graduation Ceremonies	All	Main Auditorium	Dress Attire	
11:00 – 11:15 am	Change and Depart for Airports	All Students	All	Appropriate Travel Attire	
11:15 am	Depart FBI Academy by Bus	Students Accompanied by Counselors and Instructors	Jefferson Building	Appropriate Travel Attire	
5:00 – 6:00 pm	Return From Airport	All Instructors and Counselors			
6:00 – Last Check In	Log In Students Arrival Calls	Instructors and Counselors			

Day 9 Friday, 7/2				
Date/Time	Activity	Instructor	Location	Dress
8:30 am	Breakfast	All Instructors and Counselors	Main Cafeteria	
9:30 am	Critique	All Instructors and Counselors	FBINAA Office	
	Departure	All Staff		

INSTRUCTOR	COURSE	SCHEDULE	TOTAL HOURS
G. Hendry	Intro to YLP, Adm Rules, Regs, Honor Code	Day 1 (7 – 9:00 pm)	2
G. Hendry	Leadership	Day 2 (11 – Noon) Day 4 (10 – 12:00 pm) Day 6 (6 – 6:30 pm)	3.5
JFCU	Financial Responsibility	Day 2 (1:00 – 3:00 pm)	2
Parrish	Presentation Skills	Day 7 (8 – 10:00 am)	2
F. Fakkema	Leadership in Police Organizations	Day 5 (1:00 – 5:00 pm)	4
J. Foster	Police Organization	Day 4 (1 – 5:00 pm)	4
K. Atwood	Accountability and Responsibility	Day 2 (6 – 8:30 pm)	2.5
R. Tyler	Juvenile Violence	Day 4 (8:00 am – 10:00 pm)	2
J. Rikala	Goal Setting	Day 2 (3 – 5:00 pm)	2
Lyddy	The Law and Its Effects	Day 5 (8:00 am - Noon)	4
Gannon	Ethics, Integrity, Decision Making	Day 6 (3 – 5:00 pm)	2
Davis	Leadership Communication	Day 6 (10:00 am to Noon)	2
J. Forquer	Time Management	Day 6 (8 – 10:00 am)	2
S. Hasnay	Leadership Styles and Ethics	Day 6 (1 – 3:00 pm)	2
Memorials & Historical Sites	DC Tour	Day 4 (8 – 6:30 pm)	10.5
Independent/Group Meetings/Orientation/Critique Final Exam/Book Study/Book Reports		See Schedule	18

#### TOTAL ACADEMIC HOURS 64.5

12.50

Physical Training – YLP Staff	Day 2 (5:45 – 6:45 am)	- 1
	Day 4 (5:45 – 6:45 am)	- 1
*PT COORIDINATOR C/I CHRIS LYDDY	Day 4 (7:30 – 9:00 pm)	- 1.5
	Day 5 (5:45 – 6:45 am)	- 1
	Day 5 (7:30 – 9:00 pm)	- 1.5
	Day 6 (5:45 – 6:45 am)	- 1
	Day 6 (8:00 – 9:30 pm)	- 1.5
	Day 7 (5:45 – 6:45 am)	- 1
	Day 7 (1:00 – 4:00 pm) YBR	- 3

## **BOOK LIST:**

- 1. The One Minute Manager
- 2. Leadership and the One Minute Manager
- 3. Who Moved My Cheese
- 4. Lord of the Flies
- 5. Corps Values
- 6. Anyway

EACH STUDENT WILL RECEIVE BY MAIL ONE OF THE ABOVE BOOKS WHICH IS <u>TO BE READ PRIOR TO ATTENDING THE PROGRAM.</u>

**"DO NOT PURCHASE THE BOOKS"** 

ALL BOOKS ARE THE PROPERTY OF THE FBINAA AND WILL BE RETURNED TO YOUR COUNSELOR AT THE CONCLUSION OF THE PROGRAM.