



Colorado Electric Education Institute

Cooperative Youth Leadership Camp

**PERSONAL INFORMATION
QUESTIONNAIRE AND APPLICATION**

(Please print or type – use additional paper as necessary.)

Name: _____

Address: _____

City, State, Zip Code: _____

Phone: _____ Email: _____ Date of Birth: _____

Parent(s) or Guardian(s) Name: _____

School: _____ Year in school: _____ T-Shirt Size: _____

Cooperative that sponsored you: _____

List special activities in which you have participated: _____

What offices have you held in organizations? What honors have you received?

What are your plans for the future? _____

What are your hobbies, talents or special interests? _____

Why would you like to participate in CEEI's Cooperative Youth Leadership Camp?
