



## Takahashi Youth Ambassador Fellowship Program

A Program of the Japanese Cultural and Community Center of Northern California (JCCCNC)

**The Takahashi Youth Ambassador Fellowship Program is a unique and exclusive scholarship opportunity for youth to travel to Japan**

*It is often said that experience is the best teacher. If selected, you will be provided a first-hand Japanese cultural and leadership experience through your participation in the Takahashi Youth Ambassador Fellowship Program by creating new friendships, meeting with community leaders, through volunteer activities, immersing yourself in Japanese culture and representing your family and community as a youth goodwill ambassador, both here and in Japan.*

### Important Dates and Information

1. **The 2014-15 Takahashi Youth Ambassador Fellowship Program (TYAFP) is a 14-month commitment participating in cultural workshops/events, team-building activities, leadership development activities, community participation and traveling to Japan from July 16, 2015-July 28, 2015.** (travel dates are tentative)
2. **Japanese ancestry is not a requirement but a strong background of involvement in the Japanese American community is required for participation in the TYAFP, as well as a desire to learn about the Japanese/Japanese American culture, traditions and heritage both here and abroad is essential.**
3. **To be eligible for the 2014-15 TYAF Program, the applicant must be entering the 9<sup>th</sup>, 10<sup>th</sup>, 11<sup>th</sup> or 12<sup>th</sup> grade for the 2014-15 school year.** (at the time of application, 8<sup>th</sup>-11<sup>th</sup> grade)
4. **Each participant will be required to pay a participation fee of \$2,000 to cover ground transportation, meals and tour fees.**
5. **The participant and family must commit to the following mandatory activities:**

<b>Participant/Parent Interview</b>	<b>April 21-23</b> (scheduled 30 minute interview)
<b>Orientation Meeting</b>	<b>June 14, 2014</b>
<b>Participant 2014 Workshops</b>	<b>June –August, 2014*</b> (one sleepover weekend)
<b>Holiday Luncheon</b>	<b>December 20, 2014</b>
<b>Participant 2015 Workshops</b>	<b>June-July, 2015*</b> (one sleepover weekend)
<b>Trip to Japan</b>	<b>July 16, 2015- July 28, 2015*</b>
<b>Post-trip Reunion</b>	<b>August 15, 2015*</b>

**Commitment dates will be discussed during the family interview process and full participation will be taken into consideration when selecting applicants and their families.**

*\*Exact days and times are to be determined by April 7, 2015.*

*The above dates have been tentatively scheduled. The Takahashi Youth Ambassador Fellowship Program Advisory Committee may add or change dates as needed in the best interest of the program.*



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Please refer to this page to assist you through the application process. The application is considered part of the selection criteria.

### **Section I: Applicant Information**

- *Name:* Please fill out your complete name.
- *Birth date:* Please fill in your date of birth (month/day/year).
- *Address:* List your primary residence.
- *School and Grade:* List your current school and grade level. Applicant's current grade level must be 8<sup>th</sup>-11<sup>th</sup>.

### **Section II: Applicant Questions**

- *Applicant Questions:* Please answer the questions in the space provided. Please think about your answers thoughtfully and carefully.

### **Section III: Parent Information**

- *Phone numbers:* Please list all numbers where parents may be reached, including area codes and any extensions. Also list any cellular phones that may assist us in contacting parents in case of emergency.
- *Family Ancestral Prefecture:* The prefecture (or -ken, -fu, -do/to) is a specific area in Japan, like a state (i.e. Hiroshima-ken). If unknown, please list as much information (city/region) as you know.
- *Family Trip:* If your family is interested in traveling to Japan for the post-trip, check this box.

### **Section IV: Letter of Recommendation**

- Please attach a letter of recommendation from a non-family member (teacher, counselor, coach, etc.).

*Note: Other documents including a Commitment Agreement, a Medical Consent/Liability Waiver Form and copies of the applicant's Birth Certificate and Passport will be required upon the selection of the applicant.*

### **Section V: JCCCNC Membership**

Please let us know if you are currently a JCCCNC member by including your membership number. If you are not a current member and would like to receive information on other JCCCNC programs and events that we offer, check the last box and we will send you a membership application. Once the applicant has been selected to the TYAFP, **JCCCNC Membership is required.**

### **Section VI: Japanese American Community Involvement**

Please indicate any Japanese American community organizations that your family is actively involved with, the type of involvement, who was involved and the years served.

### **Submitting your application**

**Your completed application packet must be received by Friday, April 18, 5:00 p.m. at the JCCCNC office.** Faxed application packets will be accepted to meet the deadline, but will not be forwarded to the Selection Committee for consideration in place of original documents. (Faxes do not photocopy well.) The JCCCNC fax number is **(415) 567-4222.**

Submit the application along with the applicant's letter of recommendation to the JCCCNC office at 1840 Sutter Street, San Francisco, CA 94115-3220 Attn: Takahashi Program



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## Section I: Applicant Information

Applicant: \_\_\_\_\_ Birth date: \_\_\_\_\_  
First Middle Last Mo / Day / Year

Address (primary residence): \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

School \_\_\_\_\_ Current Grade \_\_\_\_\_

Applicant's e-mail address: \_\_\_\_\_ Sex (Circle) M F

## Section II: Applicant Questions

Please answer the following questions in the space provided:

**A )** Why would you like to participate in the Takahashi Youth Ambassador Fellowship Program (TYAFP)?

**B )** What do you hope to learn or gain from the experience?

**C )** Each participant has different qualities and experiences that he/she will bring to the program. How will you be an asset to the 2014-15 TYAFP?



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### Section III: Parent Information

Mother's Name: \_\_\_\_\_  
  First  Middle  Last

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Family Ancestral Prefecture: Maternal: \_\_\_\_\_ Paternal: \_\_\_\_\_

Father's Name: \_\_\_\_\_  
  First  Middle  Last

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Family Ancestral Prefecture: Maternal: \_\_\_\_\_ Paternal: \_\_\_\_\_

Family's Primary e-mail address: \_\_\_\_\_

### Section IV: Letter of Recommendation

Please attach a letter of recommendation from a non-family member who should state how they are acquainted with you and any reason(s) why you would be an ideal candidate to participate in the Takahashi Youth Ambassador Fellowship Program.

### Section V: JCCCNC Membership

Is your family a member of the JCCCNC?  
 No     Yes, membership # \_\_\_\_\_     No, but we would like receive more information.

### Section VI: Japanese American Community Involvement

Please indicate any other Japanese American Community Organizations that you and your family are actively involved with, type of involvement, and years served.

Organization	Type of Involvement	Participant / Parent	Years Served