



# Buckeye REC

Your Touchstone Energy® Cooperative 

# Youth Tour to Washington, D.C.

## Application

To be eligible to be selected for the Youth Tour to Washington, D.C., you must:

1. Be a high school sophomore or junior.
2. Be a child or legal ward of a member of Buckeye Rural Electric Cooperative, Inc. and living in a home served by the cooperative at the time of the tour.
3. Include a school transcript indicating cumulative GPA
4. Include a letter of recommendation from a guidance counselor, principal, teacher or community or organizational advisor.
5. Complete a test consisting of true/false and short essay questions about rural electrification. The test will be given once your application has been received; you will be contacted to schedule a testing time and location (if other than the cooperative office). Cooperative knowledge questions will be based on the Online Orientation course located at [www.ohioec.org/orientation](http://www.ohioec.org/orientation). Students are recommended to complete this course prior to taking the test. The course takes approximately one hour to complete.

Name: \_\_\_\_\_  
(Last) (First) (Middle) (Student goes by)

Phone: \_\_\_\_\_

Home address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Student's email address: \_\_\_\_\_

Birth date: \_\_\_\_\_ Female \_\_\_\_\_ Male \_\_\_\_\_

Birth place: \_\_\_\_\_  
(City) (State) (Zip) (County)

Social security number: \_\_\_\_\_

High School: \_\_\_\_\_

School address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Sophomore \_\_\_\_\_ Junior \_\_\_\_\_

Parent/Guardian name(s): \_\_\_\_\_  
(How names should be listed for press release)

Parent(s) cell phone number(s): \_\_\_\_\_

Emergency contact in case parents can't be reached:

\_\_\_\_\_  
(Name) (Phone number) (Relationship)

Personal Achievement: School and other activities

Organization/Activity	Number of years	Comments

Why do you want to participate in the Youth Tour to Washington, D.C.?

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**Statement of Applicant, Parent/Guardian**

We have examined this application and the records are true, complete and accurate.

Applicant signature: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please sign before returning application to the cooperative.

**Application Deadline: March 7**

Applications must be postmarked by March 7.