Sonoma County Youth Poet Laureate
2021-22 APPLICATION FORM
https://www.californiapoets.org/youth-poet-laureate-program

Applications must be received by September 15th, 2021
Questions? Email Meg Hamill: Meg@cpits.org

Eligibility:
Applicants must
• be a Sonoma county resident
• be between the ages of 13 and 19 as of September 15th, 2021
• be available to serve as Laureate for the program year, September 2021 – August 2022:
  • be living locally through the program year
  • not be enrolled in college full-time during the program year

Poems will be judged based on Content, Craft, and Voice. If you are entered into the final round, applications will be additionally judged on Leadership and Performance.

Application:
Name (last, first, middle initial): ________________________________________________________________

Pronouns: ________________________________________________________________________________

Birthdate(month/day/year):______________________________________________________________

Address: ______________________________________________________________________________

Phone: ______________________________________________________________________________

E-mail: ______________________________________________________________________________

School: ______________________________________________________________________________

Grade: ______________________________________________________________________________
• How did you hear about the Sonoma County Youth Poet Laureate program?

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• Artist Statement/Bio: Introduce yourself. Tell us who you are and what poetry means to you. (250 words maximum. Use the back if needed) Required. Note: This may be used as your bio if you advance to the final round.

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• List any awards or honors you have received (including anywhere your work has been published). List any community service or activism you have done.

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• Please attach printed copies of three of your original poems, totaling no more than 10 pages.

• Please provide the name of an Adult Sponsor who you can ask to write you a letter of recommendation IF you advance to the final round. Tip: Choose someone who knows your writing, school performance or community involvement.

Sponsor Name: ________________________________________________________________________________________

Phone Number or Email Address: ________________________________________________________________________

Name of Parent/Guardian: _______________________________________________________________________________

Signature of Parent/Guardian (not required if you will be 18 as of September 15, 2021):

________________________________________________________________________________________

Phone Number or Email for Parent/Guardian: __________________________________________________________
By submitting this application, I agree that the poetry I submitted is my original work and I meet the Youth Poet Laureate eligibility requirements. I understand that if I advance to the final round, my writing may be published as part of the program, but I still retain the full rights to publish or perform my work anywhere else I choose.

Signature: ________________________________________________________________________________________

Date: ________________________________________________________________________________________

Don't forget to attach three, original poems to this application when submitting. THANK YOU!