



# Angelo Del Toro

PUERTO RICAN | HISPANIC YOUTH LEADERSHIP INSTITUTE

## PARTICIPATION INFORMATION (Please Type or Print Clearly)

Delegation: \_\_\_\_\_ Home Assembly District #: \_\_\_\_\_

Delegation Leader: \_\_\_\_\_ Home Senate District #: \_\_\_\_\_

1. Student Name: \_\_\_\_\_  
(Last Name) (First Name) (Middle Initial)

2. Gender:  Female  Male  Other (Specify) \_\_\_\_\_

3. Hispanic Heritage ties to: (Select all that apply)  
 Puerto Rico  Costa Rica  Guatemala  Paraguay  
 Argentina  Cuba  Honduras  Peru  
 Bolivia  Dominican Republic  Mexico  Spain  
 Chile  Ecuador  Nicaragua  Uruguay  
 Colombia  El Salvador  Panama  Venezuela

Please check the option that best describes your language fluency:  
 English only  English and some Spanish  
 Fluent in English and Spanish  Spanish only

4. Primary Telephone: \_\_\_\_\_ Secondary Telephone: \_\_\_\_\_

5. School Email: \_\_\_\_\_

Non-School Email: \_\_\_\_\_

6. Home Address: \_\_\_\_\_  
(Number and Street)  
\_\_\_\_\_  
(City) (State) (Zip Code)

7. Parent / Guardian: \_\_\_\_\_  
(Full Name) (Relationship to student)

8. Parent / Guardian Contact: \_\_\_\_\_  
(Daytime Telephone) (Evening Telephone)

9. Emergency Contact: \_\_\_\_\_  
(Full Name) (Emergency Telephone)

10. School District: \_\_\_\_\_ 10. School Name: \_\_\_\_\_

11. Principal's Name: \_\_\_\_\_ 12. School Phone: \_\_\_\_\_

Please submit this document by January 31, 2024

This contract is funded through the New York State Education Department.



THE STATE EDUCATION DEPARTMENT/  
THE UNIVERSITY OF THE STATE OF NEW YORK/ALBANY



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## PARENTAL / MEDICAL CONSENT FORM (ENGLISH)

<b>THIS IS TO CERTIFY THAT I/WE UNDERSIGNED PARENT/GUARDIAN OF:</b>	
_____	
NAME OF STUDENT	
1. PARENT/GUARDIAN NAME:	PARENT/GUARDIAN PHONE:
	CELL
	HOME
	WORK
2. ADDRESS:	
_____	
3. EMERGENCY CONTACT NAME:	
_____	
EMERGENCY HOME PHONE:	
_____	
3. PLEASE LIST ANY MEDICAL CONDITIONS / MEDICATIONS / DIETARY NEEDS / ALLERGIES OF THE STUDENT:	

In consideration of the benefits to be derived by our son's/daughter's participation at the *2024 Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute (PR/HYLI)*, during the **2023- 2024 school year**, I/we certify that he/she may participate in any normal and routine educational or recreational programs of the PR/HYLI program, hereby release and discard Questar III, New York State Education Department, their officers, agents, instructors, and employees from any and all illness, injury or accident occurred in or suffered by said son/daughter while traveling to, attendance at, or participation in any PR/HYLI program(s) from the time of his/her departure from home until his/her return here to.

This will further certify that I/we, the undersigned parent(s)/guardian(s), hereby consent and grant permission should the necessity arise, to the furnishing of medical treatment and hospital services as ordered or recommended by a qualified physician, including the administration of an anesthetic, laboratory procedures, medical or surgical treatment, x-ray examination, or other hospital services. Consent is hereby granted to the attending physician(s), hospital(s), and/or clinics to release necessary information to our local doctors and for use in claims for insurance coverage.

Parent / Guardian Signature(s):	Date:
Print Name(s):	Date:

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## Authorization to Photograph, Audio Tape, and/or Video Tape Student 2024

Student's Name: \_\_\_\_\_ Delegation: \_\_\_\_\_

Parent / Guardian Name (print): \_\_\_\_\_

As a parent or legal guardian of the above referenced student, I hereby authorize *Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute*, or any organization involved with the program to share student information, interview, photograph, audio tape and/or video, tape the student while he/she is participating in the *2024 Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute (PR/HYLI)* and local delegation trainings. I understand that these will be used for educational programs, educational conferences or workshops, or other purposes authorized by Questar III BOCES including but not limited to use on the Questar III BOCES and PR/HYLI websites, and I consent to such use. Scholarship winners' photos, names and high schools may also be disclosed.

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Parent / Guardian Signature:

Date:

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## CODE OF CONDUCT

**Cooperation:** Participants will show respect for the rights, privacy, and property of others. Participants will respect and cooperate with Institute staff, adult chaperones, and other participants. Participants may only visit one another in specified hospitality rooms, never in another individual's hotel room(s). At no time are male participants permitted to visit female participants in their rooms or vice versa. Participants will not engage in any intimate display of affection or have inappropriate physical contact throughout the weekend Institute. Parents/Guardians will be contacted if any violation of this rule is determined and will be responsible for any incurring transportation or other expenses associated with dismissal from the Institute.

**Participation:** Participants must comply with the schedule for Institute functions, including activities, workshops, meals and curfew. Student Delegates must inform their chaperones of their whereabouts at all times.

**Property:** The State is not responsible for safeguarding your property. Participants will safeguard their personal property and property of others who may share their hotel room and will show respect for the property and facilities of the hotel and Institute facilities. A room inspection and inventory of hotel property list will be conducted upon arrival and departure. Participants are financially liable for damages. All facilities must be left clean and orderly. Hotel property is not to be moved and/or removed from rooms.

**Dress:** Participants will dress appropriately for all Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute activities. During some activities, students may use appropriate informal attire (i.e. Jeans, T-shirts, Sneakers, etc.) Appropriate business attire is required for the Legislative Mock Assembly, and semi-formal attire for the Student Recognition Dinner.

**Identification and Registration Packet:** Participants are always required to wear the Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute identification badge and carry a photograph identification (School ID or driver's license) during the weekend. You will find your name badge in your packet. This badge is very important. It is your ticket for bus transportation, meals, and all Institute events. All staff and volunteers at the Institute will wear name badges for the same reason. Keep and wear your badge at all times.

**Alcoholic Beverages/Drugs:** Possession and/or use of alcoholic beverages or illegal drugs, other than those prescribed by a licensed doctor, are forbidden and will result in immediate dismissal from the Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute. Offenders will be reported to the appropriate authorities. Advisors/Chaperones must be advised of all medications prescribed for members of their delegation. Parents/Guardians will be contacted if any violation of this rule is determined and will be responsible for any incurring transportation or other expenses associated with dismissal from the Institute.

**Weapons/Firearms:** Possession of weapons and/or firearms will result in immediate dismissal from the Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute. Offenders will be reported to the appropriate authorities. Parents/Guardians will be contacted and will be responsible for any incurring transportation or other expenses associated with the violation of this rule.

**Room Assignment Check & Curfew:** All participants are required to be present for a nightly room check to be done by chaperones. Failure to observe curfew without expressed permission from a chaperone will result in dismissal from the Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute.

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**Smoking:** Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute is tobacco-free. Courteously adhere to rules of non-smoking.

**Activities:** All participants will adhere to the Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute program and agenda. Everyone must be on time for scheduled activities. All students will remain in the group they have been assigned to and will maintain room assignments from the beginning to the end of the Youth Leadership Institute. Pool, fitness room and billiard room are off limits.  
**NO EXCEPTIONS.**

**Student Contract:** All participants will adhere to the rules as outlined and will affirm their agreement by signing a contract to this affect. This form must be submitted to attend Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute. If a student is dismissed from the Institute he/she will be sent home and the parents/guardian's will be responsible for all expenses incurred. The school principal will be notified and any scholarship to be awarded by the Youth Leadership Institute will be forfeited.

**Lodging:** In the event of an emergency, your parent/guardian can reach you during the Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute at the following hotel:

Desmond Hotel Albany  
660 Albany Shaker Road  
Albany, NY 12211  
518-869-8100

Curfews will be enforced and are to be observed by everyone. Hotel room visitation rules will be strictly enforced. Participants are always required to wear appropriate clothing when they are outside their hotel rooms. See item # 4.

**Legislative Building:** Cameras and cell phones are allowed. At the security checkpoints, participants will be required to remove their coats and send personal belongings through the security monitors. All pen knives, metal nail files, and any other items that may be taken at the security checkpoints should be left at home. Limit jewelry, chains, keys that may set off the metal detector. Please limit bag size. Put your name on (or in) all personal articles.

**Remember to pack:** PHOTO ID/License, School ID Card and a copy of your health insurance card.

**Institute Expenses:** The cost of almost everything associated with the Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute is covered; hotel, meals, Institute activities, etc. You may want to bring extra money for snacks, film, postcards, gifts, tips and other personal matters. Don't bring too much; you will be very busy during your three days in Albany and will not have time for shopping.

**Weather:** Albany tends to get cold in March, and it may rain. Please make sure that you bring appropriate clothing attire.

**Personal Items:** Write your name on all your important belongings, especially your luggage. It is recommended that valuable items be left at home. Lost items must be reported to your chaperone immediately.

**Parental and School Approval:** Both parental and school permissions are required to attend Angelo Del Toro Puerto Rican / Hispanic Youth Leadership Institute.

**THE STUDENT CONTRACT MUST BE SIGNED BY ALL PARTIES.**

**Rules of Conduct:** Participants are required to review and observe the "Rules of Conduct" at all times.

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## STUDENT CONTRACT

March 8-11, 2024

I, \_\_\_\_\_, from \_\_\_\_\_ High School, have reviewed the rules of conduct presented to me by the sponsors of the *Angelo Del Toro Puerto Rican/Hispanic Youth Leadership Institute*. In signing my name to this document, I promise to abide by these rules. If I break any of the rules, I understand that I will be immediately dismissed and sent home from this event, as well as jeopardizing my participation in any future activities, including receipt of scholarships.

In the event I am dismissed, my parent/guardian and I understand that arrangements including transportation costs for my return home will be the responsibility of my parent/guardian who will be notified immediately. In addition, my school principal will be notified.

Possession or use of alcoholic beverages/illegal drugs and/or possession of weapons will lead to immediate dismissal and may lead to discipline action under my school district's code of conduct.

I have read this contract and will abide by all the rules.

Date: \_\_\_\_\_ Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Principal Signature: \_\_\_\_\_

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**Absence Waiver Form**

I understand the educational value of the **2024 Angelo Del Toro Puerto Rican/Hispanic Youth Leadership Institute**. I, therefore, encourage the student listed below to participate in this event to be held from March 8-11, 2024. Considering the educational nature of this Institute, this student will not be marked absent for school days during the event.

Name of the student: \_\_\_\_\_

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal's Name

\_\_\_\_\_  
School District Name

