

# SPECIAL OLYMPICS USA GAMES ORLANDO 2022

### **2022 USA GAMES**

# SOOK Youth Leadership Experience Nomination Form

DEADLINE: MAY 15<sup>™</sup> AT MIDNIGHT

USA Games – June 5<sup>th</sup> – June 12<sup>th</sup>, 2022 – Orlando

Athlete & Unified Partner **must** be from same Unified Champion School.

# **Athlete Information**

Name			Male 💹 🛚 F	emale
Age	Date of Birth: Month	Day	Year	
Home Address		t 15 to 18 years old the su		
		/		
Day Phone (	)	Night Phone ( )		
Athlete email _				
School Name _				
Teacher Name	of UCS			
Athlete is (of 2	021-2022 School Year):	Freshman Sophomor	e 🗌 Junior 🗌	Senior _
Day Phone	/	Cell Phone	_/	
<u> </u>	Parent/Guardia	n Information (d	of Athlete)	
Parent/Guardia	n Name			
Relationship to	Athlete			
Home Address				
City / Zip			/	
Home Phone				
Work Phone _	/			
Cell Phone				
Email				
Emergency Cor	ntact Name			
Day Phone	1	Night Phone	/	

# Athlete Inventory:

Evaluate	the Athlet	e's level o	f independ	dence <i>(1 =</i>	Low / 10	= High)			
1 🗌	2 🗌	3 🗌	4 🗌	5 🗌	6 🗌	7 🗌	8 🗌	9 🗌	10 🗆
Athlete of	can feed hi	m/herself	without su	upervision.	Yes 🗌	No 🗌			
Athlete o	can shower	, brush te	eth, hair c	are, dress	, etc. witho	ut superv	ision. Y	∕es □	No 🗌
Explain	help neede	d:					· · · · · · · · · · · · · · · · · · ·		
Amount	of time Ath	nlete requi	res in the	morning to	o groom &	dress:			
Will it be	e overly har	d on the	Athlete to	be away fi	rom home?	Yes 🗌	No [		
Does the	e Athlete ha	ave difficu	lty followii	ng directio	ns? Yes	☐ No			
If Yes,	please expl	ain:							
Behavi	ors ( <u>pleas</u>	se check a	ll that app	<u>oly)</u>					
Hits Thro Pulls Bite Run Ove Wet	others unpows things hair sothers others sees others away rly dependent bed ive a brief	ent on adu			ehavior, att	Overly Likes t Cries c Difficu Gets h	head oreign obj rearful to be alon often alty followi omesick withdraw	ie ing direct	

#### Uniform Information—Athlete:

Please indicate the correct sizes for the athlete below. ❖ Use a measuring tape - Measure carefully & provide accurate measurements. Height\_\_\_\_\_ Weight \_\_\_\_ Waist \_\_\_\_ Hips \_\_\_\_ Chest List the size the Athlete normally wears in each of the following clothing items: **Men's Sizes** T-shirt Small Medium Large X Large 2XLarge Polo shirt Small Medium Large X Large 2XLarge Small 🗌 Medium Large X Large 2XLarge Shorts/Pants Small Medium Large X Large 2XLarge Jacket **Women's Sizes** Females should also list the size they would need in a Men's sizes – just in case. T-shirt Small Medium Large X Large 2XLarge Polo shirt Small Medium Large X Large 2XLarge **Shorts/Pants** Small X Large 2XLarge Medium Large 🔙 X Large 2XLarge Jacket Small Medium Large \_\_\_ Travel Information: # of hours? Has the Athlete ever traveled by charter bus? Yes No Has the Athlete ever traveled by airplane? Yes No 🗌 Is the Athlete able to sit comfortably for long periods of travel? Yes No 🗌 Does the Athlete have discomfort or motion sickness while traveling? Yes No | | Travel comments

## **Unified Partner Information**

Name			Male Female
Age	Date of Birth: Month	Day	Year
(U	nified Partner must be at lea	ast 15 to 18 years old the	e summer of 2022)
Home Address	5		
City / Zip		/	
Day Phone (	)	Night Phone ( )	
Unified Partne	r email		
School Name			
	e of UCS		
Unified Partne	r is ( <i>of 2021-2022 School Y</i>	<i>(ear</i> ): Freshman 🗌 Soph	omore 🗌 Junior 🗌 Senior 🛭
Day Phone		Cell Phone	
<u>Pare</u>	ent/Guardian Info	ormation (of Ui	nified Partner)
Parent/Guardi	an Name		
Relationship to	o Unified Partner		
Home Address	5		
City / Zip			/
Home Phone	/		
Work Phone			
Cell Phone _			
Email			
Emergency Co	ontact Name		
Day Phone	/	Night Phone	/

# Unified Partner Questionnaire:

What social media platforms do you use?
☐ Facebook ☐ Instagram ☐ Snapchat ☐ TikTok ☐ Twitter ☐ Other
What Special Olympics Oklahoma roles have you held before?
☐ Fans in the Stands ☐ Unified Club Member ☐ Youth Activation Committee Member ☐ Volunteer ☐ Other
What is your strongest leadership quality and how do you use it in your daily life?
In a few sentences, please share why inclusion is important to promote in your community.
In a few sentences, please share how you currently promote inclusion in your school and/or
community

#### Uniform Information—Unified Partner:

Please indicate the correct sizes for the athlete below. ❖ Use a measuring tape - Measure carefully & provide accurate measurements. Height\_\_\_\_\_ Weight \_\_\_\_ Waist \_\_\_\_ Hips \_\_\_\_ Chest List the size the Athlete normally wears in each of the following clothing items: **Men's Sizes** T-shirt Small Medium Large X Large 2XLarge Polo shirt Small Medium Large X Large 2XLarge Small Medium Large 📙 X Large 2XLarge Shorts/Pants Small Medium Large X Large 2XLarge Jacket Women's Sizes Females should also list the size they would need in a Men's sizes – just in case. T-shirt Small Medium Large X Large 2XLarge Polo shirt Small Medium Large X Large 2XLarge **Shorts/Pants** Small X Large 2XLarge Medium Large 🔙 X Large 2XLarge Jacket Small Medium Large \_\_\_ Travel Information: Has the Unified Partner ever traveled by charter bus? Yes No Has the Unified Partner ever traveled by airplane? Yes No Does the Unified Partner have discomfort or motion sickness while traveling? Yes No 🗌 Travel comments

#### Final Words: Athlete & Unified Partner Together

Please list the ways in which you think the Athlete & Unified Partner will be an asset to the US 2022 Team:
Please share a description of the Athlete & Unified Partner's relationship:

- ► A current photo of the Athlete & Unified Partner is required with this Nomination.
- ► Letters of support are encouraged from Teachers at school.
- ► Include current SOOK Athlete Med-Release &/or SOOK Partner Form
  - > Athletes selected for the USA Games Oklahoma Team will be required to complete a USA Games Medical/Release Form.