**A picture containing graphical user interface

Description automatically generatedUnified Partner APPLICATION**

Special Olympics partners with schools across the country to promote inclusion, respect, and acceptance of students with intellectual disabilities. Unified Champion Schools engage students through a variety of opportunities that may include inclusive clubs, activities, Unified Sports & PE, and whole-school awareness campaigns. These initiatives support a positive school culture, where friendships can develop, and diversity is celebrated.

Our school’s (Unified Club/Unified PE Class) invites students to apply to serve as unified partners. Unified Partners are teammates and buddies with their peers in an inclusive environment, where everyone can develop leadership skills and have fun together!

REQUIRED: Students must be in (grade level) to serve as a unified partner.

**STEP 1:** Complete the Unified Partner Application, including the application questions and completed parent signatures.

**STEP 2:** Ask 2 teachers to recommend you by signing off on the reference signature at bottom of next page**.**

**STEP 3:** Turn application and references in to (teacher name) by (deadline).

**APPLICATION**

**STUDENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE: \_\_\_\_\_\_\_\_\_**

**GRADE: \_\_\_\_\_\_\_\_\_\_\_\_ HOMEROOM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

By completing this application, you are committing to be involved with Unified Champion Schools, serving as an inclusive youth leader, teammate, and friend.

\*Students are required to have a parent or guardian signature to acknowledge awareness of this opportunity and the commitment that comes with it.

**STUDENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE: \_\_\_\_\_\_\_\_\_**

**PARENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_**

**APPLICATION QUESTIONS**

**1-WHY DO YOU WANT TO BE A UNIFIED PARTNER?**

**2-WHAT DOES TEAMWORK MEAN TO YOU?**

**3-WHY DO YOU THINK YOU WOULD BE A GOOD TEAM MEMBER? List your strengths.**

**TEACHER REFERENCE #1**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you recommend this student to serve as a Unified Partner? 🞎 YES 🞎 NO

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TEACHER REFERENCE #2**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you recommend this student to serve as a Unified Partner? 🞎 YES 🞎 NO

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_