**My Community, My Vision Student Leader Expectations** **Pledge**

My Community, My Vision (MCMV) program is an innovative program that gives high school students a hand in building great places in their community. The program is supported by the Indiana Housing and Community Development Authority (IHCDA) and Patronicity. Below is a list of your expected responsibilities as a leader and participant in this program.

* All members of the participating groups are expected to attend workshops associated with the program—the kick-off, the page build, the site visit, and finale--with their council/group supervisor.

***2024-2025 MCMV Program Timeline*November 16th, 2024 –** Virtual Kick Off

**Early December 2024 –** Page Build (Virtual) with Bridget

**January 2025 –** Site Visit/Group Meet Up

**April 2025 –** Final Presentation Event in Indianapolis

\*Event dates are subject to change. Because of this, IHCDA allows some flexibility in students unable to attend an event date. Please note that these workshops are essential in the MCMV process and should be treated as a high priority.

* Individual participating students must read and sign this Leader Expectations Pledge and the photographic consent form and provide it to their adult leader. The adult leader must turn in a form for all MCMV participants (students and adults) with their application materials.
* Participating student leaders from each group will have some additional responsibilities in guiding the project process—mainly providing IHCDA and Patronicity staff a bi-weekly short update on project progress. Student leaders are accountable for providing these updates on time and following instructions.
* All members of the participating MCMV groups are expected to be participatory, courteous, and engaged during all meetings.
* If a group experiences any challenges or issues during their fundraising campaign, they are expected to notify and work with Patronicity/IHCDA in a timely manner.

Please print and sign two copies of this pledge. Keep one for your reference and turn the other in with your MCMV application materials for each MCMV participant.

If you have any questions or concerns about your role as a My Community, My Vision participant, please feel free to contact Meagan Heber with IHCDA at [mheber@ihcda.in.gov](mailto:mheber@ihcda.in.gov) or 317.234.3727.

I have read the expectations, including the 2024-2025 program timeline. I understand my role as a My Community, My Vision participant.

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**Student Participant Signature** **Date**

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**Student Participant Printed Name**

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**Parent/Guardian Printed Name Date**

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**Parent/Guardian Signature**