YOUTH EMPOWERMENT PROGRAM (YEP) >

COMPLETE AND SUBMIT YOUR APPLICATON:

PRINT CLEARLY IN BLUE OR BLACK INK AND SIGN YOUR APPLICATION.

GENERAL INFORMATION

STUDENT APPLICATION FORM

What is your Gender O Male O Female Which grade are you in currently? O 9 O 10 O 11 O 12 Are you a O New or O Returning Student . Your past District?			
STUDENT INFORMATION			
First Name	Middle Name	Last Name	Date of Birth
Home Address			P.O. Box
Home Phone Number (Mobile Phone Numb	oer Alternate Phon	e Number Ext.
E-mail Address			
School Name	ANG AND EMEDGE	NCV CONTA CT INFORM	G.P.A.
PARENTS OR LEGAL GUARDIA First Name	M. Last Name		ationship
	Last Name		
Employment and/or Occupation			
Home Phone Number (Mobile Phone Numb	Work Phone N	umber Ext.
E- mail A ess	1. Last Name	Re	lationship
First Name			

Employment and/or Occupation	
Home Phone Number Mobile Phone Number (Work Phone Number Ext.
E-mail Address	
Are you involved with any other after school program (Church, Com Please list and state days:	
Briefly explain your career objectives?	

Selecta meeting day, time and location that is most convenient for your schedule.

Option 1: Select a day, time and location.

OPTIONS 1			
Days	Time	Location	
O Mon.	O 5:30 – 7:30	O North	
O Tues.	O 5:30 – 7:30	O East	
O Wed.	O 5:30 – 7:30	O West	
O Thurs.	O 5:30 – 7:30	O South	

Option 2: Select a day, time and location.

OPTIONS 2			
Days	Time	Location	
O Mon.	O 5:30 – 7:30	O North	
O Tues.	O 5:30 – 7:30	O East	
O Wed.	O 5:30 – 7:30	O West	
O Thurs.	O 5:30 – 7:30	O South	

Application Waiver: By signing and submitting this application you agree that the information provided is true and correct; and you also agree to work cooperatively, and abide by the Rules and Regulations of Youth Empowerment Program.

Student Signature	Date	
Parent or Guardian Signature	Date	

Application Processing Fee \$50.00 New & Returning Students.

FOR OFFICIAL USE ONLY

Member No. Application Date	
Application Status: O Approved O Not Approve	ed O Database O Paid: Receipt No.
Assigned District	District Manager
Approved Signature: Approval Signature: Revised 9/1/15	_ Transfer