YOUTH APPLICATION

SECTION I: YOUTH INFORMATION

Date: __________

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STREET ADDRESS

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DAYTIME PHONE   EVENING PHONE   MOBILE PHONE

PRIMARY E-MAIL ADDRESS   ALTERNATE E-MAIL ADDRESS

Date of Birth: __________   Gender:  □ Female  □ Male

Race/Ethnicity (Check one):
□ American Indian/Alaska Native  □ Hispanic or Latino (of any race)  □ Other/Multiracial
□ Asian  □ Native Hawaiian/Pacific Islander
□ Black/African American  □ White/Caucasian

Were you referred to the GoodGuides program?   □ Yes  □ No

If yes, who referred you? (Check all that apply)
□ Faith-Based Organization  □ School/Education Agency
□ Juvenile Justice Agency  □ Social Service Agency
□ Nonprofit Service Organization  □ Other: ___________________________________________
□ Parent

SECTION II: PARENT/GUARDIAN INFORMATION

STREET ADDRESS SAME AS YOUTH

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DAYTIME PHONE   EVENING PHONE   MOBILE PHONE

E-MAIL ADDRESS
The person listed above is:  (Check one)

- ☐ Mother
- ☐ Father
- ☐ Grandmother
- ☐ Grandfather
- ☐ Aunt
- ☐ Uncle
- ☐ Legal Guardian
- ☐ Foster Mother
- ☐ Foster Father
- ☐ Sister
- ☐ Brother
- ☐ Other (Please Specify):

Is this also your emergency contact?  ☐ Yes  ☐ No

SECTION III: ALTERNATE/EMERGENCY CONTACT INFORMATION

Please list an emergency contact other than the person above.

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The person listed above is:  (Check one)

- ☐ Mother
- ☐ Father
- ☐ Grandmother
- ☐ Grandfather
- ☐ Aunt
- ☐ Uncle
- ☐ Legal Guardian
- ☐ Foster Mother
- ☐ Foster Father
- ☐ Sister
- ☐ Brother
- ☐ Other (Please Specify):

SECTION IV: SCHOOL INFORMATION

Are you currently enrolled in school?  ☐ Yes  ☐ No

If yes, which grade are you currently in?  (Check one)

- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ GED/Adult Education

Your current Grade Point Average is:

- ☐ A
- ☐ B
- ☐ C
- ☐ D
- ☐ Below D

What is your current school name:

If not in enrolled in school, why not?  (Check all that apply)

- ☐ Dropped out  Dropout Date:  ____________  Last Grade Attended:  ____________
- ☐ Suspended  Suspension Date:  ____________
- ☐ Terminated  Termination Date:  ____________
- ☐ Other:  ____________
If not enrolled in school, when was the last time you were enrolled school? (Check one)
☐ Within past month
☐ Within past three months
☐ Within past six months
☐ Within past year
☐ Within past three months
☐ Within past six months
☐ More than one year ago

Do you plan to graduate from high school?
☐ Yes ☐ No

Have you thought about plans after school?
☐ Yes ☐ No

If yes, what are your plans after school? (Check all that apply.)
☐ Community College
☐ Four-year College or University
☐ Marriage and/or Start a Family
☐ Move to a New City or State
☐ Military
☐ Stay at Home
☐ Trade School
☐ Travel
☐ Other (Please Specify):

What do you hope to gain from participating in the GoodGuides youth mentoring program?
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

SECTION V: PARENT/GUARDIAN CONSENT AND SIGNATURE

I certify to the best of my knowledge that the information provided on this Youth Application is true and accurate. I also give my informed consent and permission for my child to participate in the GoodGuides Youth Mentoring Program and its related activities.

______________________________
Parent/Guardian Name (Please Print)

______________________________
Parent/Guardian Signature Date

______________________________
Youth Name (Please Print)

______________________________
Youth Signature Date