

Continued: Applicant's Full Name _____

(2) Organization _____

Dates of participation _____ Title _____

Responsibilities _____

(3) Organization _____

Dates of participation _____ Title _____

Responsibilities _____

Signature _____ Date of Submission _____

Note: This program is a year round program for students 6th- 12th grade. Students participate for 5 days from 9am-12pm.

For Office Use Only:

Interviewed by _____ Date of Interview _____

Remarks
