



## PLEASE PRINT CLEARLY

| Name: Nickname:   |   |                   |
|---|---|-------------------|
| Address: City   | : State:  | Zip:              |
| Phone#: Cell Phone  | ne #:   |                   |
| Email Usage:  | Daily Weekly Monthly  | v □Rarely □ Never |
| Alt. Address: City  | : State:  | Zip:              |
| *Date o<br>SSN: Birth   | f<br>: Age:   |                   |
| How did you hear about this position?  School (name)  Friend  Other           |   |                   |
| Gender:   | <b>Public Assistance Recipient:</b><br>Please check if apply. |                   |
| Male Female T-Shirt Size  | TANF   Yes   No   Foster Child   Yes   No                     |                   |
| Race/Ethnicity:   | Food Stamps 🗌 Yes 🗌 No  |                   |
| White American Indian or Alaska Native  | GA/SSI/RCA 🗌 Yes 🗌 No   |                   |
| Asian Black or African American   | Homeless 🗌 Yes 🗌 No   |                   |
| Hawaiian Native or other Pacific Islander                                     | Free/Reduced Lunch 🗌 Yes 🗌 No                                 |                   |
| Hispanic or Latino  | Language(s) spoken at home:                                   |                   |
| Multi-racial or Other   |   |                   |
|   |   |                   |
| <b>Emergency Contact Information:</b>   |   |                   |
| Name: Phone:  | Relationship:   |                   |
| Current School Status: In-School/Enrolled Out-of-School                       |   |                   |
| Number of Credits Earned:       Current Grade Point Average:                  |   |                   |
| Current Year in High School: $9^{th}$ $10^{th}$ $10^{th}$ $11^{th}$ $12^{th}$ |   |                   |
| Current or Last School<br>Attended:   |   |                   |
| Current or Last School  |   |                   |

## Tell us about yourself!

(attach additional pages if necessary)

1. What's your story? Write freely about who you are. You can describe your home life, your interests, how you spend your free time, your goals, and/or challenges.

2. Have you had any job experience and\or have volunteered in community service? Can you describe your experience? How would your coworker or others describe your personality?

**3.** What do you enjoy about the outdoors? Have you been to a Forest Preserve? If yes which one?

**4.** What made you decide to apply for the CLC? Why do you want to be part of the program?

As part of the Chicago CLC Program, you will be conserving our natural resources through outdoor conservation service work, enhancing environmental awareness, teamwork and leadership skills. If you are under 18 YOU MUST have your parent or legal guardian show their support for your commitment to and participation in the Program by signing their name below.

## Parents/Legal Guardians:

I give full support for my son/daughter to apply for and participate in the Chicago CLC Program. I realize that completing this application does not guarantee my son/daughter's acceptance into the Chicago CLC Program.

## Release form for the Chicago Conservation Leadership Corps Program

I certify that the information in this application is true to the best of my knowledge.

I am aware that I may be prosecuted for fraud and/or perjury if I deliberately give false information.

I agree to allow the release of information on this form for a verification check that is necessary.

I agree to allow the release of grades, test scores, attendance, and demographic information (For example: Name, Address, etc.) from the school that my child is attending.

I certify that no member of my family is in a position of influence or authority, which would affect my being hired, my supervision, or the acquisition or administration on grants, which fund my position.

I agree to have my photograph taken and used by the Chicago CLC Program.

I understand that my Photo may be used in materials that promote the Friends of the Forest Preserves, SCA and the Chicago CLC Program, but not limited to brochures, flyers or other promotional materials.

I understand that the Friends of the Forest Preserves, SCA and the Chicago CLC Program will distribute these promotional materials to various public and private sector organizations as an informational and marketing tool, and by signing this agreement I acknowledge the right of the Friends of the Forest Preserves, SCA and the Chicago CLC Program to undertake such actions.

Participant Signature

Please Print

Date

Parent Signature (If under the age of 18) Please Print

Date

Please drop off, email or mail your completed application to:

Chicago CLC Program 28 E. Jackson Blvd, Ste. 1102 Chicago, IL 60604-2330 alice@fotfp.org Questions? Call (312) 356-9990 Ask for Alice Brandon or Sam Vergara <u>alice@fotfp.org</u> or <u>svergara@thesca.org</u>

Application Deadline: April 18, 2011 Applications sent by mail must be postmarked by April 18 (no exceptions)