



Ladies In Waiting, Inc.
 "Enriching & Empowering the Lives of Girls"

JEWEL APPLICATION

APPLICANT INFORMATION

Name:

Address:

City:

State:

ZIP Code:

Date of Birth:

Grade:

Grade Point Avg.:

Race/Ethnicity:

Email:

SCHOOL INFORMATION

School Name:

School Address:

City:

State:

Zip Code:

Guidance Counselor:

PARENT/GUARDIAN INFORMATION

Name:

Address:

Phone:

City:

State:

ZIP Code:

Relationship:

Email:

APPLICATION FEE

Application fees are used in order to defray the administrative costs of operating and administering the mentoring program. Are you willing to pay a \$25 non-refundable administrative fee to help offset costs? Yes No

If No, please give your reason: _____

EMERGENCY INFORMATION

Doctor's Name:

Address:

City:

State:

Zip Code:

Medical Conditions/Allergies:

GENERAL QUESTIONS

"Jewel" Talk Rap Sessions are held in two locations, which will you attend?

Douglas County – Deer Lick Park South Cobb County – South Cobb Recreation Center

Are you currently involved in Extra Curricular Activities or have a Part-time Job? YES NO

If yes, what activities and will your schedule conflict with Saturday "Jewel Talk" Rap Sessions and Field trips?



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What are your future goals?

What special talents do you think you can bring to "Ladies In Waiting," Inc.?

What do you think you can gain from participating in "Ladies In Waiting, Inc.?"

Who lives with you? : Put an "X" inside the parentheses beside each person who lives with you.

- () Mother
- () Father
- () Step-parent
- () Grandparent
- () Other relative
- () People not related to you

Do you have an adult friend or relative you trust?

- () No
- () Yes

Who is that person? *There may be more than one.*

- () Parent
- () Other relative
- () Teacher
- () Other - Who? _____

Do you have an adult friend or relative who can provide you information about jobs or careers?

- () No
- () Yes Who is that person?

There may be more than one.

- () Parent
- () Other relative
- () Teacher
- () Other - Who? _____

Do you have an adult friend or relative who can provide you information about how to get an education?

- () No
- () Yes Who is that person?

There may be more than one.

- () Parent
- () Other relative
- () Teacher
- () Other - Who? _____

How much education does your mother have?

- () Less than high school
- () High school graduate
- () Attended college or technical school

How much education do you want to have?

- () I don't want to graduate from high school
- () I want to graduate from high school
- () I want to attend a technical school
- () I want to attend college
- () I want to graduate from college



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What type of job/career do you want to have when you get out of school?

How comfortable do you feel expressing yourself in writing?

- () Very comfortable
- () Somewhat comfortable
- () Not very comfortable
- () Not at all comfortable

Application Checklist:

- Copy of most recent REPORT CARD
- \$25 REGISTRATION FEE
(CHECK OR MONEY ORDER MADE OUT TO LADIES IN WAITING, INC)

Parental Acknowledgement

Your daughter has submitted an application to participate in a program in which volunteers will serve as mentors. A mentor is a caring, adult volunteer who is willing to spend time helping students succeed in school and in life. Be aware that if your daughter participates in Ladies In Waiting, certain topics will be discussed, including but not limited to: Dating, Alcohol & Drug Abuse and Sexual Abstinence and that if you have problems with your daughter participating, you will let us know.

Please understand that if she becomes part of the program, it is mandatory for her to participate in all educational and recreational portions of the program, unless a family emergency comes up that is beyond your control. It is also mandatory for your daughter to share her report card with the mentor each grading period in order to encourage improvement in her grades and to set educational goals.

By signing below agree to the terms set forth above and you grant permission to Ladies In Waiting to use any photographs, video recordings, and/or any other recordings that occur during the program for legitimate purposes.

SIGNATURES

Print Name of Applicant:

Signature of applicant:

Date:

Print Name of Parent/Guardian:

Signature of Parent/Guardian:

Date:

Please return your application by mail to:
 Ladies In Waiting, Inc.
 PO Box 1534
 Lithia Springs, GA 30122