



ProjectRISE

Creating Paths to Possibilities



INTEREST FORM

Name: _____

Date: _____

Address: _____

Email: _____

Phone Number: _____

Additional Contact Phone Number: _____

DOB: _____

Highest Grade Completed: _____

Currently Working? Yes _____ No _____

Seeking Employment? Yes _____ No _____

Updated Resume? Yes _____ No _____

Desired Career: _____

Do you have housing? Yes _____ No _____

Do you have transportation? Yes _____ No _____

Would you need us to provide transportation? If so, what is the address?

Do you need childcare? Yes _____ No _____

Can you attend the full four weeks (only three absences allowed)?

How did you hear about the program? _____

What has stopped you from being "successful"? _____

Why do you think you should be accepted into ProjectRISE?
