



Participant Application

Name _____ DOB _____ M F

Address _____ City _____ Zip _____

Home phone (____) _____

Cell Phone(____) _____

Social Security # yes no

Email _____

Driver's License yes no

Auto Make/Model _____ Year _____

Payments _____

How well does your car run?

Highest Level of Education _____ Date of H.S Graduation of GED _____

Have you applied for Federal Financial Aid Yes No

If yes, please provide your FAFSA number

Total Monthly Gross Income _____

List all sources of monthly
income _____

List all credit card debt.

Date of Emancipation_____

Last Social Worker's Name and Phone

Number_____

Do you already have an emancipation coach through RCC? Y N

Name and phone # of Emancipation Coach_____

Do you have a drug history? (this may not prevent you from being accepted)

Please attach an autobiography. It should include your family upbringing and background, your current living arrangement, your current status in school and your present job. Also describe your career goals and educational plans.

I certify that all of the above information and the attached autobiography are true and accurate to the best of my knowledge, and I give permission for Inspire to verify the above stated information including and not limited to a credit report.

Signature

Date

Mail or Fax this form, your autobiography, transcripts and two brief letters of reference from teachers, counselors, social workers, or employers to:

Inspire Life Skills Training, Inc.
2279 Eagle Glen Pkwy. #112
PMB. #131
Corona, CA 92883

Kristi Camplin
Executive Director
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