



Teen Achievers

IN BUSINESS & INDUSTRY

Membership Requirements:

Maintain a 2.5 Cumulative GPA

Submit quarterly report cards

Teen Achiever Program Application Fee—\$30
(10 Month Program participation required)

Optional Fees:

ALL FEES ARE NON-REFUNDABLE

Mission: The YMCA Black Achievers program is a national college readiness initiative designed to help teens of color set and pursue high educational and career goals.

**FOR OFFICE USE ONLY**

Date Application Received _____
Membership: _____ Family _____ Youth
Center _____
Payment: _____ CASH _____ CHECK# _____
Receipt # _____
Amount \$ _____
Membership ID _____

TEEN ACHIEVERS MEMBERSHIP APPLICATION

Name:		Gender (M or F):
Date of Birth:	Home Phone:	Cell Phone:
Email:	Facebook:	Twitter:
Current Address:		
City:	State:	Zip:
Current School:		
City:	State:	Zip:
Grade (circle one): 9 10 11 or 12	Cumulative GPA:	ACT or SAT Score:

PARENT INFORMATION

Parent Name:		Date of Birth:
Address: (if different from student)		Preferred number to call:
City:	State:	Zip:
Place of Employment:		Work number:
Email Address:		

EMERGENCY CONTACT

Name:		
Address:		Phone:
City:	State:	Zip:
Relationship:		

CAREER INTEREST

Please indicate two or three careers you would be interested in learning more about:

____ Engineering	____ Information Technology	____ Journalism/ Communication	____ Health Care
____ Business	____ Entrepreneurship	____ Fine Arts	____ Vocational/ Technical
____ Law/ Government	____ Education	____ Other:	

PERSONAL DEVELOPMENT

Please indicate which areas you need assistance with :

____ Study skills	____ Test taking skills	____ Time Management
____ Tutoring	____ Writing	____ Reading/Comprehension

Student Signature:	Date:
Parent Signature:	Date:



STUDENT PROFILE

Name:

School:

GPA:

Our mission is to support and encourage African American youth in the areas of academics, career exploration, college preparation, and leadership development.

In 50 words or less please explain your interest for wanting to participate in the Black Achievers program. **(New applicants only)**

Please indicate your race:

_____ African American

_____ Asian/ Pacific Islander

_____ Hispanic/ Latino

_____ American Indian/
Alaska Native

_____ White

_____ Other

Indicate your involvement or enrollment in any previous or current educational/leadership programs other than Black Achievers? If so, please explain:

PARENT PROFILE

Name:

College Graduate(Yes or No):

Our mission is to support and encourage African American youth in the areas of academics, career exploration, college preparation, and leadership development.

In 50 words or less please explain your interest for wanting your child to participate in the Black Achievers program.
(New applicants only)

PARENT INVOLVEMENT

Parental involvement is key to making our program successful. Parent participation is required. Please indicate which activities you are interested in providing support when needed.

_____ Registration	_____ Stuffing Envelopes	_____ Hospitality
_____ Communications	_____ Special Projects & Events	_____ Other

ACADEMIC RELEASE

I, _____, parent/guardian of _____ do hereby give permission to the Wisconsin School Systems of Parochial School Systems to release my child's Grade Point Average/Report Card following each grading period. I understand that the records will be kept strictly confidential and are for the sole purpose of assisting my child according to his/her educational needs.

Please note that the following information will be strictly confidential:

Family income level: (Please Check One)

_____ \$0-\$9,999	_____ \$10,000-\$14,999	_____ \$15,000-\$22,999
_____ \$23,000-\$33,999	_____ \$34,000-\$49,999	_____ \$50,000-\$74,999
_____ \$75,000 or more.		

Parent/Guardian Signature:

Date: