



MyPATH: Partnership Advancing Today's Heroes Summer 2014
an opportunity for young people to construct their paths in becoming community change agents together

PLEASE TYPE OR PRINT NEATLY

YOUTH INFORMATION

FIRST NAME:

LAST NAME:

STREET ADDRESS:

CITY:

ZIP:

HOME PHONE:

CELL PHONE:

EMAIL:

BIRTH DATE:

GENDER:

RACE:

WHOM DO YOU LIVE WITH? Parents One Parent with Relatives with non-Relatives

PARENT NAME:

PHONE:

PARENT EMAIL:

EMERGENCY CONTACT:

PHONE:

DO YOU HAVE ANY HEALTH CONDITIONS THAT WE NEED TO BE AWARE OF?

ACADEMIC INFORMATION – list school and grade you will be in for 2014-15

SCHOOL:

GRADE:

List your involvement in school extra-curricular activities or clubs:

COMMUNITY INVOLVEMENT

List your involvement in community and/or leadership activities:



MyPATH APPLICATION

an opportunity for young people to construct their paths in becoming community change agents together

QUESTIONS

How would participation in MyPATH benefit you?

Tell us about one thing you are good at?

What do you think about the community in which you live?

MyCom PATH Schedule

The MyCom PATH is a summer program that will meet June 23-27, at least once a week during the month of July and August 4-6, 2014. Sessions (except for July) will be from 10 am to 4pm. In addition there will be the opportunity to participate in Experiential Learning Days in July (dates to be determined).

Acceptance of Requirements

By signing below, we understand and accept the attendance requirements for the MyCom MyPATH summer program. My child agrees to and I support his/her commitment to 100% attendance, to attend all sessions, and at least 1 Experiential Learning Day. I give permission and understand that photos and/or video of my child may be used to promote MyCom programs.

Youth Signature

Date

Parent Signature

Date

Applications are due Friday June 13, 2014

Mail to: PARTNERSHIP FOR A SAFER CLEVELAND, 2239 East 14th St, Cleveland OH 44115
or you may fax to 216.523.1823 or email to apetrella@safercleveland.org