



Thank you for your interest! We look forward to getting to know you better. Please complete the following so that we can learn how we might be able to help you stay on track to graduate, get work experience, and plan for life after high school. Eligibility restrictions apply.

Name:		Male or Female	Date of Birth:
Phone:	Cell:	Can we text you? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:			
Email:		Can we contact you on Facebook? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Parent/Guardian Name:			Phone:
County of Residence:		High School:	Homeroom:
Current Grade Level:	Expected Graduation Date:	Best Time to Meet With You: (Ex: study hall, time/day)	

Bridges to the Future can help you prepare for life after graduation. Which might you want to learn more about? Check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Exploring My Strengths | <input type="checkbox"/> Exploring Local Jobs |
| <input type="checkbox"/> Job Shadows/Internships/Local Business Tours | <input type="checkbox"/> Completing Job Applications Correctly |
| <input type="checkbox"/> Creating Resumes, Cover Letters and References | <input type="checkbox"/> Interview Skills that Will Help Me Stand Out |
| <input type="checkbox"/> Budgeting My Money Now and After Graduation | <input type="checkbox"/> Tutoring/Study Skills |
| <input type="checkbox"/> Learning How to Become a Leader | <input type="checkbox"/> Volunteering in My Community |
| <input type="checkbox"/> Starting My Own Business | <input type="checkbox"/> Knowing My Plan for After Graduation |
| <input type="checkbox"/> Knowing the Steps to Take to Reach My Goals | |
| <input type="checkbox"/> Other: _____ | |

The following list indicates several educational and career goals Bridges to the Future might be able to help with. Check all that interest you.

- | | | |
|--|---|--|
| <input type="checkbox"/> Maintaining Good Grades/Attendance | <input type="checkbox"/> Co-op | <input type="checkbox"/> Vocational/Technical School |
| <input type="checkbox"/> College/Community College | <input type="checkbox"/> On-the-Job Training | <input type="checkbox"/> Part Time Job in the Summer |
| <input type="checkbox"/> Part Time Job during the School Year | <input type="checkbox"/> Part Time Job after Graduation | |
| <input type="checkbox"/> Full Time Employment after Graduation | <input type="checkbox"/> Military Careers | |
| <input type="checkbox"/> Other: _____ | | |

Do you currently have a job? Yes No

If so, where? _____ **About how many hours per week do you work?** _____

Return to Main office
Contact: *Mark Hauck*

mhauck@censop.com
(570)336-5589