



Youth Application Form

Locations of the program delivery will be determined by the number of participants from the different areas

Read the whole form before you start & please be brief. **Each applicant must complete a form. Please print or type.**

Business Name (if known):			
Last Name:	First Name:	Age:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Name of Parent or Guardian:		Name of School:	
		Your Phone #:	
Mailing Address:		Fax (optional):	
		E-mail (optional):	
Town:	Postal Code:	If you have partners, list their names:	
Please answer each of the following with a brief explanation:			
What business will you enter into?			
Where will you conduct your business?			
Do you have transportation to the place where you are going to sell your product or provide your service?			
Do you have enough space to make and/or store products or equipment?			
Who do you think will buy your product and service? (Please be specific!)			
How will you spend the money we provide to help you get started?			
During the project, will you attend the small business training workshops?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you take part in the display and celebration at project completion?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to work with the project facilitators and a mentor?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Student Signature:		Date:	
Parent/Guardian Signature:		Date:	

Please fax the completed application form by **May 6, 2011** to 826-7330 or drop it off at Community Futures Lakeland located at #201 5016-50 Ave. Bonnyville. Questions? Call Monique @ (780) 826-3858 or email admin04@telus.net