Gals Lead Teen Mentorship Program Application

Dear Applicant,

Congratulations! Your interest in the Gals Lead Teen Mentorship Program shows that you are a young woman who wants to pursue her goals and dreams.

The Gals Lead Teen Mentorship Program is a unique two–day weekend training course designed and developed with your natural strengths, talents, and abilities in mind. Upon embarking on this journey you will gain valuable insights about yourself and the other young gals in this course. You will learn that you are not alone in thinking and feeling the way you do about your future. You will learn that there are multiple paths to accomplishing and achieving your dreams and goals and they are all right. You will learn that you are unique, special, and extremely talented. You will have the opportunity to learn from some highly successful and incredible women from various backgrounds and industries in the Southern Maryland area. You will have the opportunity to explore yourself – all that is beautiful, wonderful, and vulnerable – in a safe place where your authentic self-expression is celebrated. You will be provided with personal assessments that give insight into your unique values and strengths - assessment that many people never have the opportunity to experience until much later in life, if ever. You will be given the tools and resources to help you integrate all that you learn in this two day course into your everyday life so that accomplishing your goals and dreams is something you can do consistently.

As women, we know the value of connection, communication, and collaboration. That is why as a member of the Spring 2013 Gals Lead Mentorship Program, you will also gain access to a private Facebook group to keep you connected to the other young women from the Spring 2013 class before, during, and after the course. We believe that staying connected with like-minded people will only serve to enhance what you learn in this course.

Your enrollment in this program is based on a first come, first serve basis and as such requires you to complete the attached application in its entirety and email to register@galslead.com, mail to Attn: Erin Ross – Gals Lead Program, 21945 Three Notch Rd, Ste. 101, Lexington Park, MD 20653, or fax to 301-863-6592. The last day to enroll the this program is April 1. Applications will not be accepted after this date.

If you are unable to make the tuition payment and need scholarship assistance, please complete the attached scholarship application to be considered no later than March 20. We will be notifying of all scholarship awards by April 1. Consider the following idea if you need financial assistance and are not awarded a scholarship: Ask a woman in the business community to provide the tuition payment for your enrollment in the course. Many women business owners understand the value of mentorship and learning what this program teaches at a young age.

As founders of the Gals Lead Teen Mentorship Program, our deepest desire is that you walk away from this weekend with a deeper sense of who you are, an ability to celebrate and express yourself in the world, a clear vision for your future, and a plan to make your goals & dreams a reality in the months and years to come.

Welcome to a journey where you discover yourself, your dreams, and your future!

Sincerely,

Erin Ross & Amy Thompson
Founders – Gals Lead Teen Mentorship Program

Erin Ross – erin@erinrossagency.com or 301-481-6271
Amy Thompson – amy@lolabelle.com or 240-925-4759
Gals Lead Teen Mentorship Program Application

Student Information

Name: ________________________________________________

Address: ____________________________________________

Phone: ______________________ Email: __________________

Parent/Guardian Name & Contact #: ____________________________________________________

Emergency Contact Name & Phone #: __________________________________________________

Are you a sophomore, junior, or senior? ____________________

What High School do you attend? ________________________

Can you access a computer to complete online assessments? ______________________________

Do you actively use Facebook? ________________________________________________

How did you hear about the Gals Lead Teen Mentorship Program? ______________________________

Parent/Guardian Authorization

I hereby grant permission for my child to apply to and participate in this program. I permit my child and her image to be involved in activities and media events that are designed to promote the benefits of the Gals Lead Teen Mentorship Program, including but not limited to photographs, videotapes, posting images on Gals Lead website, newsletters, Facebook page and press releases.

Parent/Guardian Name: ___________________________________________________________

Parent/Guardian Signature: ________________________________

Date Signed: ___________________________________________________________________

Tuition & Payment Method

☐ Full Tuition Payment: $175
☐ Payment Plan: $90 (Second Payment of $90 will be auto-drafted on April 1, 2013).

Name: __________________________________________________ Date: ______________________

Phone: ______________________ Email (please print clearly): ______________________________

Billing Address: _________________________________________________________________

City: ______________________ State: _______________ Zip: ____________________________

Payment Method (please circle one): Mastercard Visa Amex Discover Check Total: $________

Credit Card #: __________________________ Exp Date __________ VCode

Name on Card __________________________ Signature __________________________

By signing above, I agree to have my credit card charged in the payment method checked above. If I elected the payment plan, I authorize this credit card to be charged on April 1, 2013 for the remaining balance due of $90.
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Student Questionnaire

Please answer the following questions:

1. What do you hope to gain by participating in the Gals Lead Teen Mentorship Program?
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

2. What is it that keeps you up at night regarding accomplishing your goals and dreams in the future?
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

3. What is the biggest struggle you encounter on a consistent basis regarding accomplishing your goals and dreams in the future?
_______________________________________________________________________
_______________________________________________________________________

4. What is the one goal around accomplishing your goals and dreams in the future that seems unattainable?
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

5. If you could learn how to do one thing to fix this, what would that be?
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

6. What is the biggest improvement you’d like to make in your situation?
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

7. What would you do anything to solve/get rid of/achieve/or increase related to accomplishing your dream or goals in the future? What results or breakthrough would make you happy?
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
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Scholarship Application

Scholarship awards will be provided in two ways: Full Tuition ($175) or Half Tuition ($90). Please identify which scholarship you are applying.

☐ Full Tuition Scholarship ($175)
☐ Half Tuition Scholarship ($90)

Name: ________________________________________________________________

Phone: _____________________________  Email: _______________________________

Please complete the following questions (if additional space is needed, please use separate paper):

1. Explain why you are applying for a scholarship.

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

2. What will it mean to you to have this scholarship awarded to you?

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
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3. Share 3 things you are most proud of accomplishing on your own or with the help of others.

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