The Arrowhead United Way and the Women's Leadership Council Announces their

2013 WINTER COLLEGE CRUISE

NAVIGATING THE WATERS OF EDUCATION TO A SUCCESSFUL FUTURE

YOUNG LADIES WHO ARE HIGH SCHOOL AGE JUNIORS & SENIORS ARE INVITED TO ATTEND THE 2013 WINTER COLLEGE CRUISE TO LEARN ABOUT THE RESOURCES AND TOOLS THAT WILL BETTER PREPARE THEM FOR THE COLLEGE EXPERIENCE

COMPLIMENTARY CONTINENTAL BREAKFAST & LUNCH WILL BE SERVED AT NO COST TO REGISTERED PARTICIPANTS

WHERE: Cal State University San Bernardino

5500 University Drive, San Bernardino, CA 92410

WHEN: Saturday, January 26, 2013

TIME: 8:30 a.m. to 1:00 p.m.

Mail, fax, or email applications to Rachel Hart by January 16, 2012:

646 N. D Street, San Bernardino, CA 92401
P: 909-884-9441 F: 909-885-4096
Rachelh@ahuw.org
Applications can be found at http://uwwlc.weebly.com/

Must work, attend school, or reside in the Arrowhead United Way service area (Big Bear City, Big Bear Lake, Bloomington, Blue Jay, Cedar Glen, Cedarpines Park, Colton, Crestline, Crest Park, Devore, Fawnskin, Grand Terrace, Green Valley Lake, Highland, Lake Arrowhead, Loma Linda, Muscoy, Patton, Rialto, Rimforest, Running Springs, San Bernardino, Skyforest, Sugarload, & Twin Peaks)

Thank you to our generous sponsors and grantors:

CALIFORNIA STATE UNIVERSITY SAN BERNARDINO

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Arrowhead United Way
ArrowheadUnitedWay.org

Application Process

2013 Winter College Cruise
A program of Arrowhead United Way Women's Leadership Council

INSTRUCTIONS

Deadline:

Applications are due by January 14, 2013.

STEP 1: DETERMINE IF YOU ARE ELIGIBLE

Eligible applicants must be women who:

- High school age Juniors or Seniors
- Live, work or go to school in Arrowhead United Way service area.

STEP 2: COMPLETE THE APPLICATION

- Fill out form
- Complete attached parental permission forms
- Complete and sign communications release

STEP 4: SUBMIT YOUR APPLICATION

Mail your completed application and reference letters to the address below:

Arrowhead United Way
Attn: Rachel Hart
646 North D Street
San Bernardino, CA 92401

Scan & Email Applications to Rachelh@ahuw.org

Fax applications to 909.885.4096

***PLEASE INDICATE ON ENVELOPE:** 2013 Winter College Cruise

ALL COMMUNICATION IS THROUGH EMAIL.
PLEASE BE SURE TO USE AN EMAIL YOU CHECK REGULARLY FOR THE MOST UP TO DATE INFORMATION REGARDING THE EVENT.

Women's Leadership Council's
2013 Winter College Cruise Application

NAVIGATING THE WATERS OF EDUCATION TO A SUCCESSFUL FUTURE

Personal Information

Full Name _____ Date_____

Address_____

Home Phone _____Alternate Phone_____

Email Address _____ Age_____

Educational Information

Current High School _____ Next year I will be: a junior _____ a senior_____

What is your Career Goal? _____

Do you want to continue your education after you finish high school? Yes ____ No ____

If yes, where do you plan to go? College or Technical School Name _____

If no, why not? _____

_____

How would you rate your skill level in each of the following?
✓ Good, Fair, or Needs Improvement for each.

Areas	Good	Fair	Needs Improvement
Setting short and long term goals			
Managing your time to complete tasks			
Persistence to solve problems and reach goals			
Ability to find help to complete career and educational goals			
Knowledge of post-secondary educational institutions			

Are you interested in receiving information about the high school mentoring project also sponsored by the Women's Leadership Council? _____

2013 Winter College Cruise

Parental/Guardian Permission Form

I hereby give permission for my child, _____ to participate in the **2013 Winter College Cruise** on January 26, 2013 sponsored by the Arrowhead United Way Women's Leadership Council.

I understand that my child is to abide by all rules of conduct during the event and that any child that disregards accepted behavior standards may be sent home at the parent or guardian's expense. I will provide transportation for my child if she is not in the bus when it departs from the pickup locations.

By consenting to allow my child to participate, I give up all claims against Arrowhead United Way, its employees and volunteers, for any injury, accident, illness or death occurring during the event. The organization does not carry accident insurance for participants. I also relieve the organization of any responsibility for damage to or loss of my child's property during the event.

_____

Signature of Parent or Guardian

_____

Print Parent or Guardian Name

Arrowhead United Way

646 North D Street
Post Office Box 796
San Bernardino, California 92402-0796

tel (909) 884-9441
fax (909 885-4096

www.ArrowheadUnitedWay.org

Arrowhead United Way

Communications Release & Parental Permission Form

Site Information

Event 2013 Winter College Cruise

Location CSUSB Date 1/26/13

Publicity Authorization and Release

Name _____ Date _____

Day Phone _____ E-Mail _____

Address _____

City, State, ZIP _____

I hereby assign the rights to interview transcripts, video recordings and/or photographic recordings made of me by Arrowhead United Way Women's Leadership Council hereafter referred to as AUW's WLC, to said United Way.

I hereby authorize the editing, duplication, reproduction, copyright, exhibition, broadcast and/or nonprofit use and distribution of said transcripts, recordings and/or photographs for purposes deemed suitable by AUW. Such promotion includes, but is not limited to, publication of said transcripts, recordings and/or photographs in newspapers, newsletters and other mass media.

I understand that by my signature, I also waive all rights to compensation for the use of all said materials.

I hereby waive any right to approve the finished products. My image and statements referring to me may be used with or without identifying me.

I hereby certify that I am 18 years old or older and am competent to contract my own name insofar as the above is concerned. I have read the foregoing release, authorization and agreement, before affixing my signature below and warrant that I fully understand the contents thereof.

Signature _____ Date _____

Parental or Legal Guardian Consent and Release

If the individual is a minor (younger than 18 years old), the following must be signed by a parent or legal guardian:
I hereby consent and agree, individually and as a parent or legal guardian of the minor, to all the terms and provisions above.

Signature _____ Date _____

Name (please print) _____ Relationship to minor _____

Day Phone _____ E-Mail _____

Address _____

City, State, ZIP _____

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