

COLUMBIA URBAN LEAGUE, INC.

**SPRING & SUMMER 2023**

# **PRE-APPRENTICESHIP**

**APPLICATION**



**Columbia  
Urban League, Inc.**

*Empowering Communities.  
Changing Lives.*

**James T. McLawhorn, Jr. | President & CEO**  
**Regina R. LaBrew | Workforce Coordinator**  
**Phone: (803) 733-2550 | Website: WWW.CULSC.ORG**

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# Columbia Urban League, Inc.

## 2023 Pre-Apprenticeship Application

**APPLICATION**  
**DEADLINE**  
**SPRING Feb 28**  
**SUMMER May**  
**26, 2023**

### PERSONAL INFORMATION

Please fill in the blank spaces

Applicant's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ SSN: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_ Gender: M F  
Address \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_ (\_\_\_\_) \_\_\_\_\_ Mobile Phone: \_ (\_\_\_\_) \_\_\_\_\_  
Applicant's Email Address: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

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### PARENTAL INFORMATION

Please fill in the blank spaces

Parent's/Guardian's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_ Mobile Phone: (\_\_\_\_) \_\_\_\_\_  
Parent's/Guardian's Email Address: \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_  
Relationship to Applicant: \_\_\_\_\_

Please list all of the applicant's regular medical/cognitive conditions.

\_\_\_\_\_  
\_\_\_\_\_

*Please check all that apply to you. If none apply, go to the next question.*

\_\_\_\_\_ Current Medicaid Client \_\_\_\_\_ Previous Medicaid \_\_\_\_\_ Foster Care Client

You must answer the following question. If you do not have insurance, write "none."

Insurance Company: \_\_\_\_\_  
Health Insurance Policy #: \_\_\_\_\_  
Policy Holder: \_\_\_\_\_

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## WORK EXPERIENCE

(This includes babysitting, cutting grass, general household chores, etc.)

Name of Company: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone Number: \_ (\_\_\_\_) \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## COMMUNITY INVOLVEMENT, ACTIVITIES & AWARDS

(provide additional sheet if necessary.)

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## URBAN LEAGUE INVOLVEMENT

Have you ever participated in any Columbia Urban League programs, attended any Urban League sponsored events, or received any Urban League scholarships?  Yes or  No

If yes, check each program and indicate when you participated.

Young & Gifted Awards  
When: \_\_\_\_\_

Project Ready  
When: \_\_\_\_\_

Level Up  
When: \_\_\_\_\_

STEP  
When: \_\_\_\_\_

YDA  
When: \_\_\_\_\_

CIP  
When: \_\_\_\_\_

Other: \_\_\_\_\_  
When: \_\_\_\_\_

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Please include the following important information so that your application can be processed.

**Your application is incomplete and will not be considered** without the following materials:

**1. Expressions:**

Please answer the questions below on the next page (4). Responses to each question should not exceed two paragraphs and must be included with your application

- a. What skills would you like to develop in this program? And why?
- b. What is your most outstanding achievement in your educational career? (And why).

**2. Identification:**

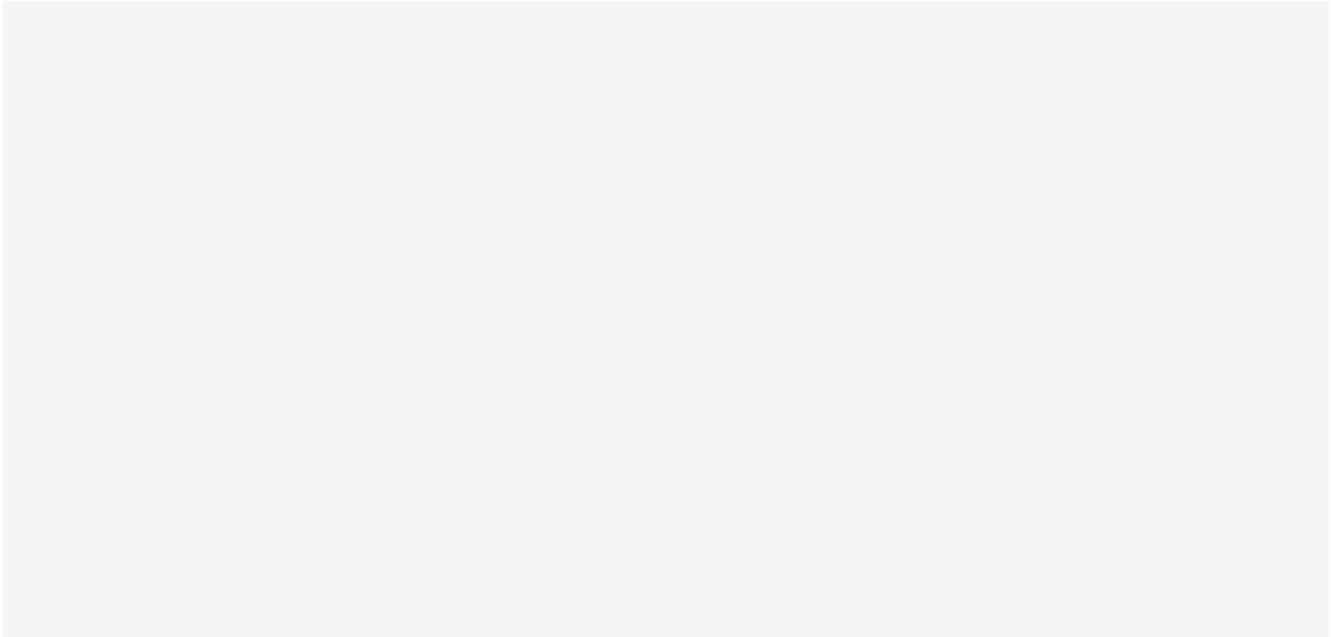
Please include a copy of some form of identification that shows proof of age or date of birth (i.e., Medicaid Card, Driver's License, Birth Certificate, etc.).

**Due to limited resources, we can only serve some people who complete an application; therefore, completing this application does not guarantee a job. Additionally, the applicant is not obligated to accept employment upon selection.**

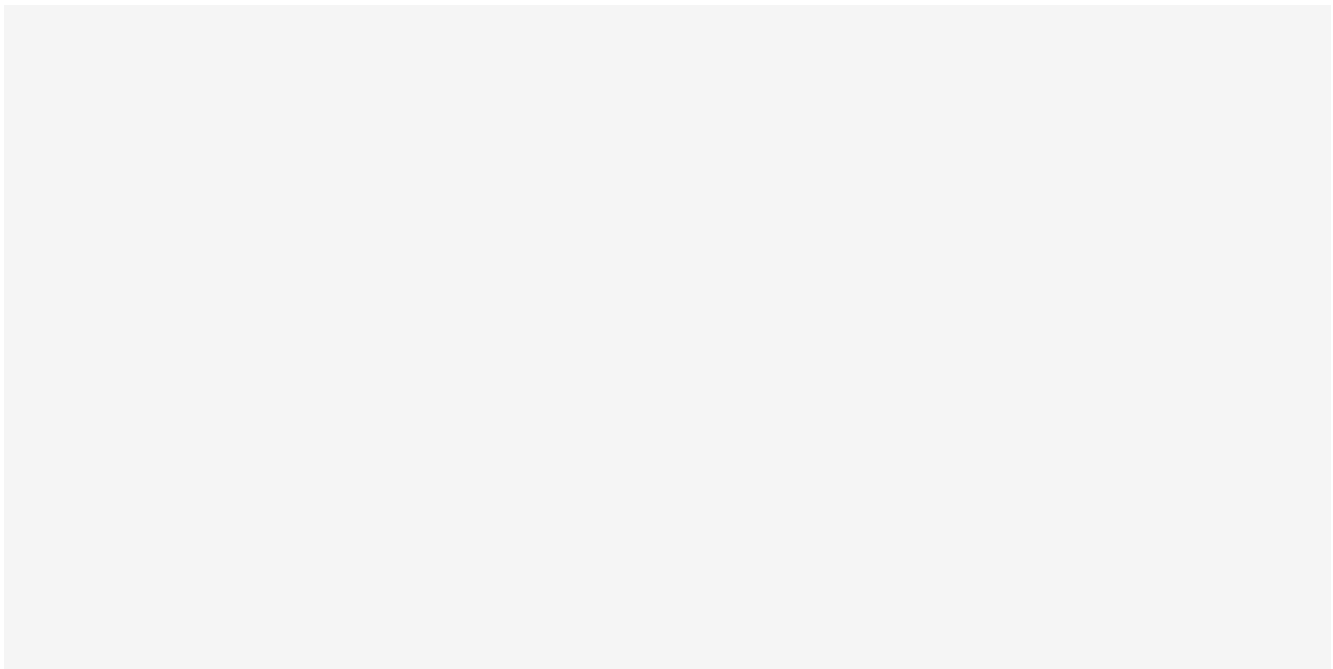
**\*\*The tentative start date for CULPA Spring is March 9, 2023, and Summer Work Experience is June 12, 2023- July 7, 2023.**

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**1. What skills would you like to develop in this program? And why?**



**2. What is your most outstanding achievement in your educational career?**



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## ANNUAL FAMILY INCOME & HOUSEHOLD SIZE

Please check one. Please note that this program's purpose is to serve those most in need. We will give priority to those with the greatest financial need.

- |  |   |
|--|---|
| <input type="checkbox"/> UNDER \$15,000      | <input type="checkbox"/> \$50,000 - \$74,999  |
| <input type="checkbox"/> \$15,000—\$24,999   | <input type="checkbox"/> \$75,000 - \$100,000 |
| <input type="checkbox"/> \$25,000 - \$49,999 | <input type="checkbox"/> \$100,000 +          |

PLEASE PROVIDE THE TOTAL NUMBER OF PEOPLE IN YOUR HOUSEHOLD: \_\_\_\_\_

FOR MORE INFORMATION, PLEASE EMAIL CULPA @ CULSC.ORG OR [RLABREW@CULSC.ORG](mailto:RLABREW@CULSC.ORG)

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Read the following statement carefully, then sign and date:

**All required information/documentation must be included with this application.** I understand that the Columbia Urban League, Inc. is not responsible for any original information mailed with this application. Applicants must disclose all pertinent information upon completion of this application. Any falsified information will result in disqualification of participating in this program. I hereby declare that this application's information is accurate and complete to the best of my knowledge. I understand that failure to complete this application, in its entirety, will result in the non-consideration of an incomplete application. Selected participants will receive a stipend at the end of the two-week work experience. **WE WILL NOT DISBURSE CHECKS AFTER August 15, 2023.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ALL COMPLETED APPLICATIONS MUST BE MAILED BY THE DUE DATES.**

Columbia Urban League, Inc.  
Post Office Box 50125  
Columbia, SC 29250-0125