

Science Technology Enrichment Program 2023



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PRESIDENT AND CEO

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STEP APPLICATION

PHONE: (803) 799-8150

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Columbia Urban League, Inc.

2023 STEP Application

APPLICATION
DEADLINE
April 28, 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: _____

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/Family Preservation

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

Insurance Company: _____

Health Insurance Policy #: _____

Policy Holder: _____

WORK EXPERIENCE

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

Name of Company: _____

Supervisor: _____ Phone Number: _ (____) _____

Duties: _____

COMMUNITY INVOLVEMENT, ACTIVITIES & AWARDS

(additional sheet if necessary.)

URBAN LEAGUE INVOLVEMENT

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

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

Young & Gifted Awards
Year: _____

Project Ready
Year: _____

Level Up
Year: _____

STEP
Year: _____

YDA
Year: _____

CIP
Year: _____

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 do you want to gain from this experience this summer?
- b. What have you done in preparation for summer employment?

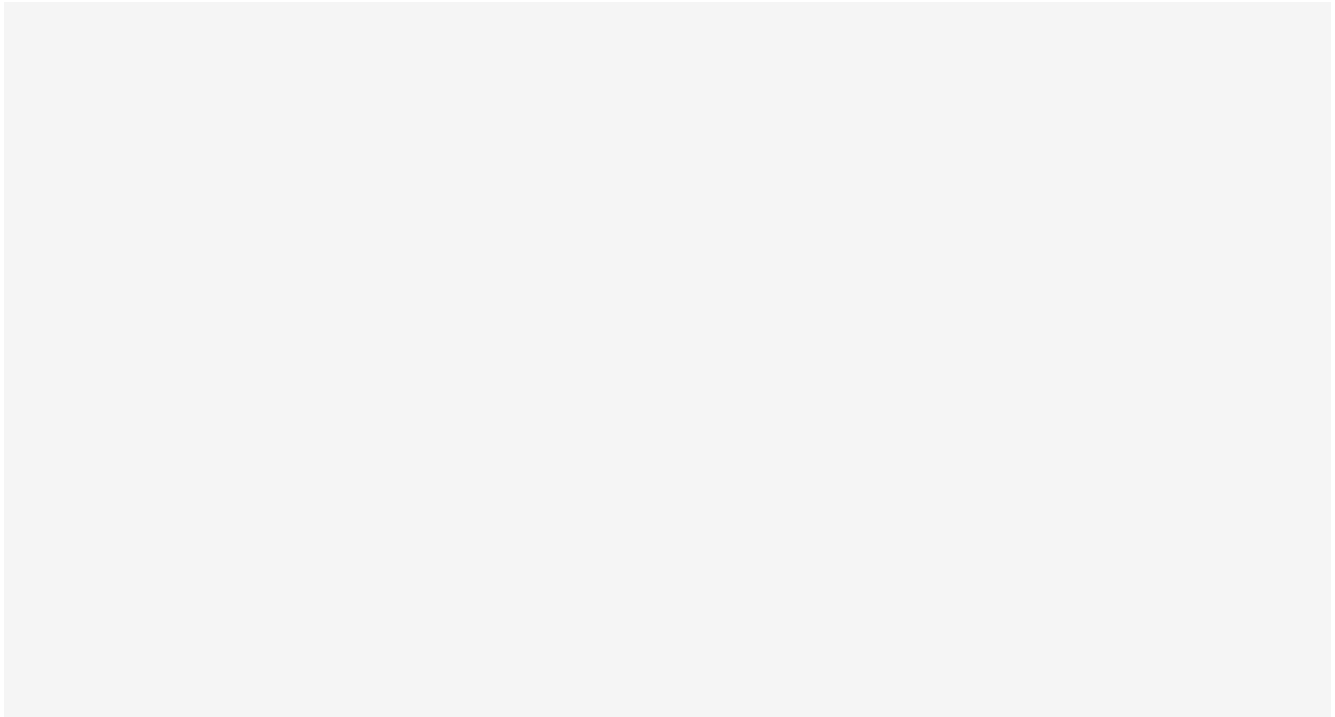
2. Identification: Email to: STEP@culsc.org

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.).

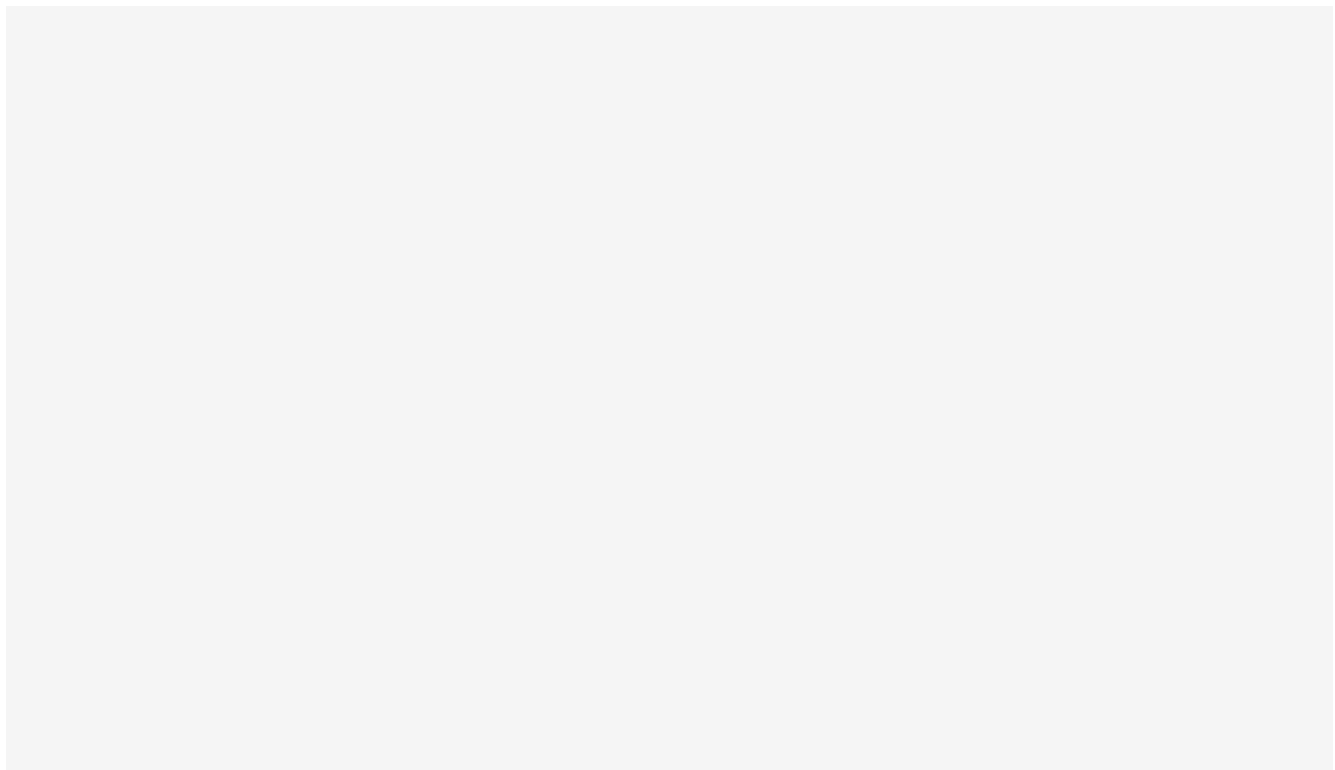
Due to limited resources, we cannot serve everyone who completes an application; therefore, completing this application does not guarantee a job. Additionally, the applicant is not obligated to accept employment upon selection

****The tentative start date for STEP placements is Monday, June 19, 2023, and ends on Friday, August 4, 2023, in two-week cycles. Please note that this date is subject to change. ****

1. What do you want to gain from working this summer? And why?



2. What have you done in preparation for summer employment? Give Examples



ANNUAL FAMILY INCOME & HOUSEHOLD SIZE

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. Please check one.

- | | |
|--|---|
| <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: _____

PARENTS / GUARDIANS PLEASE READ

Job placement for the Science Technology Enrichment Program (STEP) is not guaranteed! Placement depends on the availability of resources and funding. The only way to ensure your child's placement is if you or someone you know (i.e., family doctor, minister, or family friend) financially sponsors your child. You may provide sponsorship for \$300.00.

FOR MORE INFORMATION, PLEASE EMAIL jscreen@culsc.org

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 14, 2023.**

Applicant's Signature: _____ Date: _____

Parent's/Guardian's Signature: _____ Date: _____

ALL APPLICATIONS MUST BE MAILED BY April 28, 2023.

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