DOWNLOAD AT sbaaz.org/adults-lead-the-way

**COURSE 2 Applications are due Thurs, March 1, 2018**

 Participant Application

Lead the Way – Discover Your Passion and Influence Your Community

Full name of applicant: Birthdate: \_\_\_/\_\_\_/\_\_\_\_\_

Street address: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City and zip code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing address if different from above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: Secondary phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How often do you check email? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you consider yourself to be a “self-advocate”? yes no

Would you like to be more active in the disability community? yes no

What interest do you have that seems to be under engaged by people who are differently abled?

Have you ever been on a board of directors, panel or in a coalition? yes no

 If yes, please identify the organization and your role:

Identify your typical methods of transportation: own transportation Bus taxi light rail personal driver

Identify devices you use: manual wheelchair power chair power scooter walker crutches

 Do you use this device : ALWAYS or distance dependent

Do you have internet access at your home address? yes no

Do you have/own a computer for your personal use? yes no

Do you access the internet with a cell phone? yes no

Do you have use of a phone: landline personal cell

Are you currently working a job? yes no

 If yes, would you be able to have off every other Tuesday until 2:00 beginning in January ?

Are you currently a student? yes no

 If yes, please explain hours and days of the week

How would you get to 1001 E Fairmount Ave by 9:30 am on Tuesdays and depart at 12:30 to participate in the training?

If you complete the initial course sessions,

 are you interested in applying as a mentor attendee for the second session? yes no

Session dates:

 **COURSE 1 - TUESDAYS 2018:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| January 9 | January 23 | February 6 | February 20 | March 6 | March 20 |

 **COURSE 2 - TUESDAYS 2018:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| April 3 | April 17 | May 1 | May 15 | May 29 | June 12 |

Please use extra space and tell us: (1,000 word limit for each question please- this can be INFORMAL!!)

 1) why you would like to participate in this project.

 2) what do you believe would help you to have the most success and positive experience?