

Business and Economic Revitalization Association (BERA)

Youth Entrepreneur Program Application

Name: _____

Address: _____

Phone: _____

How did you hear about the program?

___ School ___ Friend/family ___ other _____

Your High School: _____

Year: Freshman _____ Sophomore _____ Junior _____ Senior _____

Age: _____

This will be a 5 month after school program that meets 2 days (Tues/Thurs) a week for 2 hours (4:00p.m. to 6:00p.m.) and will require some outside of class time as well. Can you commit to this amount of time? ___yes ___no

Please list any organizations/groups/clubs/jobs you are involved in:

1) _____

2) _____

3) _____

Briefly describe your hobbies and/ or interests

Tentative program schedule: Tuesdays & Thursdays from 4:00p.m. to -6:00p.m. starting November 4, 2008 ending April 9, 2009 at Urban Institute, 200 E 75th Street, Chicago, Illinois 60619.