



Participant Application

Fill out this application and turn back in to us at The Care Center (7:00-8:15pm, 1st & 3rd Wednesdays of the month at Northstar Church). Or mail to Northstar Church: 11020 South Lebanon Road, Loveland, OH, 45140. There are limited spots. Questions? Contact Greg Knake, 205-5864.

Name: _____ Phone #: _____

Address: _____

Age: _____ Marital Status: _____

Have you participated in any of these at Northstar? (circle) *LifeWorks* *HELP Program (serving for financial assistance)*
Other Workshops? *Sunday Morning Church Service?*

Kids? (if so, list names and age)

Do you have a job? If so, what do you do? If not, do you desire to work? If so, what is holding you back? If you don't want to work, why not?

Are you currently living in government assisted/some other type of assisted housing? If applicable, is it a priority to get off of assistance? Why or why not?

FLIP OVER AND FILL OUT THE BACK SIDE AS WELL.

What are your biggest barriers to getting ahead? How could a grant dollars help remove those barriers?

You would be asked to attend a series of workshops during the evening and also meet with a coach twice a month. Do you have any time constraints? (explain)

Where do you see yourself in the next 1 year, 5 years? What are some of your goals to help you get there?

What do you hope to get out of a program like this?