



**F**antastic **U**nique **N**eat  
 A Week-long Summer Program  
 For  
**Young Women**  
 July 5-10, 2009

## Student Application Form

As a prospective applicant, you are required to submit the following information, along with a recommendation from your counselor, a recommendation from one of your teachers, and your \$50 application fee **postmarked by May 31**. Check to be made out to: LEARN to LIVE, INC. If applying for Partial Scholarship, ALL materials and Application Fee MUST be received by March 31. Please mail all application materials to the address at the bottom of this form or submit them online at our website: [www.learn-to-live.com](http://www.learn-to-live.com)

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

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

**For which Program do you wish to be considered?**

**High School** \_\_\_\_\_ **Middle School** \_\_\_\_\_

\*Sessions may be combined or separated based on the maturity level of the participants.

During the school year 2008-2009 which Grade did you complete? \_\_\_\_\_

Name of your Current School: \_\_\_\_\_

Parent's Name (or Guardian)  
 \_\_\_\_\_

Family's Permanent Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Please share Ethnic/Racial origin; Check all that apply. (This is OPTIONAL, for IRS reporting purposes).

- |   |  |
|---|--|
| <input type="checkbox"/> African American or Black        | <input type="checkbox"/> Hispanic or Latino                  |
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| <input type="checkbox"/> Asian                            | <input type="checkbox"/> White                               |

LEARN to LIVE, Inc  
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