



CARE

CAN

WILL Make a Difference

WORK INITIATIVE AND ENTREPRENEURSHIP (WIE) INC., USA.34 W 134th Street. New York, NY 10037Phone # 914 346 6868; Email: wiecare.usa@gmail.com**Participant Application****Applicant Information**

Last Name: _____ First: _____ M.I.: _____ Date: _____

Address: _____ Apt. # _____

City

State

ZIP Code

Phone: _____ Email: _____

Marital Status: _____ Social Security No.: _____ Anyone Dependent on You?: _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐Have you ever been convicted of a felony? YES ☐ NO ☐

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____**References And Next of Kin***Please list two references and one next of kin.*

Full Name: _____ Relationship: _____

Company / _____

Address: _____ Phone: _____

Full Name: _____ Relationship: _____

Company / _____

Address: _____ Phone: _____

Full Name: _____ Relationship: _____

Company / _____

Address: _____ Phone: _____

Previous And Current Employment

Current Employment: _____ Phone: _____

Address: _____ Supervisor: _____

Responsibilities: _____ Job Title: _____

May we contact your supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Starting Salary:\$_____	Ending Salary:\$ _____
Do you plan to leave this job anytime soon?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Started when:_____	Plan to leave when:_____
Previous Employment: _____			Phone: _____	
Address: _____			Supervisor: _____	
Responsibilities _____			Job Title _____	
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_From: _____	To: _
Reason for Leaving: _____				

Your Goals and Aspirations

State your Educational Goal/s

State your Career Goal/s

State your vocational interests
Extra Curriculum Interests
Spiritual Interests

What are your strengths

What are your challenges

What skill set would you like to acquire?

What do you think will help you to reach your goals?

Do you have an interest in becoming an entrepreneur and in what area?

WIE PROGRAM OF INTEREST

Name the WIE program (programs) you are interested in _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to participation in the program, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____