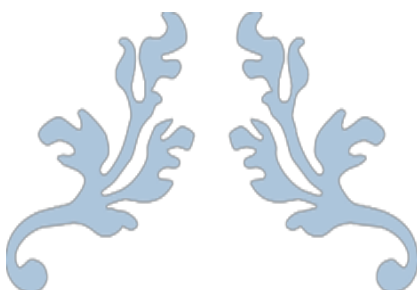


**Coconut Grove Negro Women's Club
Scholarship Mentoring Program 2016/2017**

**LADIES OF LEGACY
MENTEE APPLICATION**

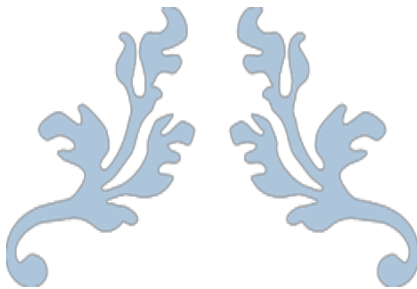


"Lifting As We Climb"



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“Lifting As We Climb”



“CGNWC” Scholarship Mentoring Program

Overview

Overview

The Coconut Grove Negro Women’s Club “CGNWC”, from inception, has provided scholarships to help with college entrance fees and expenses to several well deserving young ladies who reside in and/or have roots from the Coconut Grove, Florida. The purpose of the CGNWC Youth Mentee Program is to EDUCATE, ENRICH and EMPOWER young ladies who enter college with necessary skills to succeed in college and in life. The CGNWC Scholarship Mentoring program requires young ladies who desire to be a CGNWC Scholarship recipient to attend monthly meetings on Saturday which will run approximately 3-4 hours. Upon successfully attending each meeting, the prospective young lady will qualify to be a recipient of the CGNWC Scholarship. The program will be fun and engaging for all participating students.

The Steering Committee

The CGNWC Scholarship Mentoring Committee is comprised of a group of “active” members from the CGNWC. They recruit mentors and potential mentees, plan all training orientations and group activities, and provide support and information.

You may contact Mrs. Rose Hedgemond, Chair of CGNWC Scholarship Mentoring Committee, at (305) 490-7485 or rhedgemond@yahoo.com.

Recruitment Mentees

Mentees also complete a written application, which includes a parent/guardian consent form. We ask that parents attend an orientation held during the beginning of the program (January 2017) to receive more information about the program, requirements and guidelines.

Group Activities

The CGNWC Youth Mentor Program will meet once a month beginning in January 2017. During each meeting, the mentee will enjoy various activities geared around pertinent life-skills that are educational and fun! Scheduled activities include; however, not limited to, the following: Financial Literacy, College Preparation (Readiness), Social Responsibility, Social Decorum, Health and Wellness and more. A formal schedule for meeting topics will be published at the meet & greet session with the prospective CGNWC Scholarship mentees and parents.

“CGNWC” Scholarship Mentoring Program

Mentee Application

Please write clearly and answer every question.

Date: _____

Did you have a mentor before our program? Circle: Yes or No

Name: _____

Age: _____ Birthday: _____

Grade: _____ School: _____

Name of Parent(s)/Guardian(s): _____

Address: _____

City: _____ Zip Code: _____

Home Phone Number: _____

Child's Mobile Phone Number(s): _____

Parent's Mobile Phone Number(s): _____

Child's Email Address: _____

Parent's Email Address: _____

- Do you prefer to receive news from the CGNWC Scholarship Mentor Program regarding upcoming events and other important information via email, in the mail, or both? (Circle One)

Email

Mail

Both

- How did you hear about the CGNWC Scholarship Mentor Program?

What are your plans after high school?

What colleges/universities are you planning on applying to?

What degree and/or certification would you like to pursue?

What are three words that best describe you?

List and describe three things you do well (strengths):

Is there anything that you would like to change about yourself?

List the clubs, activities, or sports in which you participate. How much of your time do these activities take up?

What are areas of challenge, if any? (Examples: Procrastination, easily distracted, over achiever, etc.)

COMMITMENT AGREEMENT:

- Will you try your best to attend, and participate, in the scheduled monthly group meetings (Saturday)?

Circle: **Yes or No**

Signature: _____ Date: _____

CALENDAR OF EVENTS

Date	Time	Event Description	Location/Address
Friday, January 13, 2017	7:30PM - 9:00PM	Kick Off and Meet & Greet	Ritz Carlton; Coconut Grove, FL
Saturday, January 21, 2017	10:30AM - 1:30PM	“CGNWC” Scholarship Mentee Meeting Financial Literacy Social Decorum	KROMA Art Gallery Coconut Grove, FL
Saturday, February	TBA	“CGNWC College Fair	TBA
Saturday, March 18, 2017	10:30AM - 1:30PM	“CGNWC” Scholarship Mentee Meeting Entrepreneurism/Career Readiness Social Decorum	KROMA Art Gallery Coconut Grove, FL
Saturday, April 15, 2017	10:30AM - 1:30PM	“CGNWC” Scholarship Mentee Meeting Health and Wellness Social Decorum	KROMA Art Gallery Coconut Grove, FL
Saturday, May 20, 2017	10:30AM - 2:30PM	“CGNWC” Scholarship Mentee Meeting <i>Last meeting. This will be an extended meeting to include a review of all covered material. Formal Dining tutorial included.</i>	Ritz Carlton; Coconut Grove, FL
June 2017 Date TBA	TBA	Scholarship Awards & Mentee Recognition Banquet	TBA

“CGNWC” Scholarship Mentoring Program

PARENT/GUARDIAN CONSENT AND LIABILITY RELEASE FORM

I, _____, give consent for my child, _____, to participate in the CGNWC Scholarship Mentoring Program and all Youth Mentoring Program activities; including all organized activities. I have considered the advantages of participation in the CGNWC Youth Mentoring Program. I agree the CGNWC Scholarship Mentoring Program, its agents, officers, members and its employees shall be released and exempt from any liability for damages for bodily injuries or property damages that may occur as a result of participation in the CGNWC Youth Mentoring Program, except to the extent of insurance liability as provided by law.

Signature

Date

Print Name

Relationship to child

Address

City

Zip

Home Phone Number

Mobile Phone Number

Work Phone Number

Email Address

Language Spoken by Parent/Guardian

Emergency Contact and Phone(s)

- Will you be able to provide transportation for your child to meet with the mentor?

Circle one: **Yes or No**

- On a scale of 1 to 5 (1 being the least and 5 being the most) how involved will you be in this program?

Circle one: **1 2 3 4 5 VERY INVOLVED**

- Please write here why you think your child would benefit from the program and list anything of interest, special needs or concerns:

“CGNWC” Scholarship Mentoring Program

Allergy History Form

Dear Parent/Guardian of: _____ Date: _____

According to your child’s health records, please provide us with any allergies: _____

Please provide us with more information about your child’s health needs by responding to the following questions.

- 1) When and how did you first become aware of the allergy?

- 2) When was the last time your child had a reaction?

- 3) Please describe the signs and symptoms of the reaction.

- 4) What medical treatment was provided and by whom?

- 5) If your child is required to take medication, please list the medications required.

Parent or Guardian: _____

Print Name: _____

Date: _____

**COCONUT GROVE NEGRO WOMEN'S CLUB
WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT**

1. In consideration for receiving permission to participate in the Coconut Grove Negro Women's Club "CGNWC" Scholarship Mentoring Program, I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE CGNWC, the Board of Trustees of CGNWC, their officers, agents, or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, while participating in such activity, while in, on or upon the premises where the activities are being conducted, REGARDLESS OF WHETHER SUCH LOSS IS CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise and regardless of whether such liability arises in tort, contract, strict liability, or otherwise, to the fullest extent allowed by law.

2. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage, or costs, including court costs and attorneys' fees that Releases may incur due to my participation in said activities, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or otherwise, to the fullest extent allowed by law.

3. It is my express intent that this Waiver and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE the above-named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of Florida and that any mediation, suit, or other proceeding must be filed or entered into only in Florida and the federal or state courts of Florida. Any portion of this document deemed unlawful or unenforceable is severable and shall be stricken without any effect on the enforceability of the remaining provisions.

IN SIGNING THIS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Wavier of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Agreement for full, adequate and complete consideration fully intending to be bound by same.

IN WITNESS WHEREOF, I have signed this Waiver and Agreement under seal on this

_____, day of _____, 2016.

PARENT/GUARDIAN:

PARTICIPANT:

“CGNWC” Scholarship Mentoring Program

Media Release Form

The Coconut Grove Negro Women’s Club “CGNWC”, its’ officers, board, affiliates and supporters has my permission to use my or my child’s photograph publically. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me, or my child, by reason of such use.

Parent/Guardian’s signature: _____ Date _____

Parent/Guardian’s Name (please print): _____

Child’s Name (please print): _____

Phone Number: _____

Email Address: _____

“CGNWC” Scholarship Mentoring Program

Women of Legacy

Contact Information

<u>Name</u>	<u>Position</u>
Barbara Jordan	CGNWC, President
Renita Samuels-Dixon	Financial Secretary/Funding Director
Rose Hedgemond	Scholarship Mentoring Program, Chair
Brigette Moody	College Fair, Chair
Leigh Cooper	Mentor and Special Events Coordinator
Crystel Lewis	Mentor, CGNWC Social Media and Mentor
Dawn Mangham	Mentor, CGNWC Social Media and Mentor

Email address: cgnwcmedia@gmail.com

Please follow CGNWC Scholarship Mentoring Program on Facebook, Twitter and Instagram via following handles:

- [CGNWC Facebook](#) or search "Coconut Grove Negro Women's Club, Inc. in the search engine bar
- [CGNWC Twitter](#): @cgnwcinc
- [CGNWC Instagram](#): search @cgnwcinc in the app