Sponsored by

Greater Nashville Alliance of Black School Educators

Application for Participation

**Date** **of Seminar**: September 23, 2023 **Time**: 8:30 am – 2:30 pm

**Student Information**

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_

Phone (home/cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you taken the ACT before? (circle) Yes No If yes, in what grade?\_\_\_\_\_\_\_\_ score earned \_\_\_\_\_\_

If no, what grade are you planning to take the ACT? (circle) 10th 11th 12th

Student’s GNABSE Sponsor/Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Information**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address (if different from above) city \_\_\_\_\_\_\_\_\_\_\_\_ state\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone (home/cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Approval and Signature**

I give permission for my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in this ACT prep seminar. I will be responsible for my child’s transportation to and from the seminar.  ***I understand that my child must arrive on time and be present for the entire session***.

Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cost and scholarship availability**

The cost of the seminar is $90.00. Please make checks payable to GNABSE. You may contact Donnie Crenshaw (615-766-5747) for payment or scholarship information. Scholarships are limited and are available on a first come, first serve basis.

**Lunch**

Lunch will be provided for each participant in the seminar.

**Email**

Please provide the email that you would like to use for seminar updates. (Please print clearly)

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