



Grade: \_\_\_\_\_ School: \_\_\_\_\_

## Go Girlz Application

First and Last Name: \_\_\_\_\_

Please provide your contact information:

Home/Cell Phone: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Please provide your PARENT/GUARDIAN's  
contact information:

Home/Cell Phone: \_\_\_\_\_

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

### About you:

What's your birthdate?

\_\_\_\_\_

Race/Ethnicity (check all that apply):

- White
- African-American/Black
- Asian/Pacific Islander
- Latina/a /Chicana/o
- Native American/Alaskan Native
- Other \_\_\_\_\_

Do you need any special accommodations? (For example visual aids, sign-language interpretation, and/or accessibility to wheelchair) Please explain.

\_\_\_\_\_

Did your parents attend college?

\_\_\_\_\_

Shirt Size \_\_\_\_\_ Shoe Size \_\_\_\_\_

1. Have you participated in Go Girlz before? Yes/ No

a. If yes, what grade: \_\_\_\_\_

b. If yes, what school: \_\_\_\_\_

2. How did you learn about the Go Girlz Program? \_\_\_\_\_

\_\_\_\_\_

3. How would your friends describe you? \_\_\_\_\_

\_\_\_\_\_

4. I believe it is important for women/girls to have a college education,  
from 1 (not important) -5 (very important)

1- Not important at all

2- Not very important

3- Indifferent

4- Somewhat important

5- Very important

5. Have you talked to anyone about attending college? (circle one)      Yes                      No

If yes, who? \_\_\_\_\_

6. What are some goals you have for this school year?

\_\_\_\_\_

\_\_\_\_\_