



NETworX Program Common Application

THIS BOX FOR OFFICE USE ONLY

Date Received

Date Interviewed

Status

I. Contact Information

Preferred Nickname _____ Preferred Prefix (Mr., Ms., Dr., etc.) _____

Full Legal Name _____

Preferred Telephone _____ Is this a mobile phone? Yes No

Email Address _____

Mailing Address _____

II. Area of Interest

Circle your area of interest. If you aren't sure about the terms, that is okay. Move to the next section.

I would like to be considered for participation in the NETworX Program as a/an:

Champion for Change

Ally

III. Initial Screening

- I am willing to meet with the program staff to discuss this application. **Please initial:**
- Regarding admission into the program, I understand that the program staff may say YES, NO, or NOT YET. **Please initial:**
- I am willing to undergo a background check. **Please initial:**
- I am able and willing to set aside Wednesday nights from 5:45- 8:00 pm to participate in this program. **Please initial:**
- I am able and willing to commit 18-36 months to this program. **Please initial:**



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IV. Demographic Information

Please note: the information collected in this section is used for statistical purposes only.

Gender Identity _____ Ethnic Identity _____

Birthday: _____

Please be sure to include year.

Language(s) spoken: (Please circle all that apply)

Status (Please circle)

Fluent English Fluent Spanish Limited English

Single Domestic Partnership Married

Limited Spanish Other(s):

Widowed Divorced Other:

V. Children

If you have children under the age of 18, please complete the following table. Otherwise, skip to section VI.

Child's Name	Relevant Notes & Information	Please list dietary restrictions or other relevant concerns. (If s/he will be present at program events)	Birthday (Include year, for statistical purposes)	Ethnic Identity (for statistical purposes)



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VI. Education

Highest Level of Education: (Please Circle One)

Did not graduate from high school

High School Degree or Equivalency

Vocational Training

Associates' Degree

Bachelors' Degree

Postgraduate Degree

What details of your education would you like to share (e.g., institutions, fields of study, degrees, certificates, continuing education, special competencies, current programs, future aspirations)?

VII. Career

What details of your employment, or vocational or professional life, would you like to share (e.g., dates, job titles, responsibilities, recognitions, accomplishments, future aspirations, etc.)?



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VIII. Relevant Questions

(Supplement with additional sheets if desired)

Why are you interested in participating in our program?

What would you identify as your particular strengths and interests?

What are some areas/things in your life that you would like to improve or work on?

How do you define poverty? What do you feel contributes to it?

Reflect back on your experiences in your early formative years, and think about your experience now. What points along the class continuum would you say best represent your experiences?

	Generational Poverty	Situational Poverty	Lower Middle Class	Middle Class	Upper Middle Class	<i>Nouveau Riche</i>	Generational Wealth
Childhood							
Currently							

Do you have any reservations about being matched with a program participant who

	Yes	No	If yes, please explain
Has had issues with chemical dependency?*			
Has had issues with mental health?*			
Has been in jail or prison?			
Is of another race or ethnicity?			
Is gay, lesbian, bisexual, or transgender?			
Is not of the same gender as you?			

**Note: Participants must be in recovery from dependency or under treatment for mental illness, and must have achieved stability in those areas.*



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IX. Personal Narrative

*We all have life stories. Help us begin to get to know you by sharing your story. What would you like for us to know? You can take this in any direction you'd like. **Please be succinct**, though.*



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X. Covenant

- I understand that, if admitted to the program, my eligibility to continue in the program at any time thereafter will be at the discretion, and according to the terms, of the program staff. **Please initial:**

A major component for the success of the NETworX program in all phases is weekly group meetings. The following table outlines minimum attendance rates to remain active in the program.

	Phase One (Approximately 15 weeks)	Phase Two (Approximately 18-24 months)	Phase Three (Optional; indefinitely)	Alternative Track (Indefinitely)
Champions	≥ 75%	≥ 75%	≥ 25%	≥ 75%
Allies	≥ 75%	≥ 25%	≥ 25%	n/a

- I understand, and am willing to maintain or exceed the minimal attendance rates as set forth in the above table. **Please initial:**

- I will inform the coach or program manager when I am not able to be present at a weekly meeting. **Please initial:**

In Phase Two of the program, in addition to weekly meetings, matched groups of Champions and Allies will meet at least once per month.

- I am willing to meet in matched groups outside of weekly NETworX programming at least once per month in Phase Two (Approximately 18-24 months). **Please initial:**

Please return completed application to:

The Capital City C.I.R.C.L.E.S. Initiative- A NETworX USA Affiliate
 2621 NORTHGATE LN STE 10
 CARSON CITY NV 89706
capitalcitycircles@gmail.com
 (775) 883-6506