

Empowered Work-4-Credit Application

"Empowering the mind, body, and soul of Champions"

Application guidelines:

All applicable forms must be completed by a parent or legal guardian.

Parents may apply for more than one child per family. Please use separate application forms and identification numbers for each child.

Work-4-Credit opportunities are awarded for the current season, or calendar year, and are not automatically renewed each year.

All club rules and policies apply to recipients.

The staff reserves the right to withdraw any client from the program who fails to comply with the rules, policies, and staff directives of the club.

Program participation will be based on financial need, not athletic ability.

The essay should be limited to one page typed or 2 pages written.

If you need assistance, contact Sharon Denham at

sharon@empoweredsportsclub.com or phone (260) 637-1551.



Please print or type your information clearly.

CLIENT INFORMATION		
Last Name:	First Name:	
Current Year In School (If applica	ıble)	
Date of Birth: Month	Day	Year
Mailing Address:		
Street:		
City:	State:	Zip Code:
IDENTIFICATION CODE: guardian, or player)	(last four digits of social security number; parent,	
PARENT/GUARDIAN INFORM	ATION	
Last Name:	First Name:	
Mailing Address: (if different fror	n above)	
Street:		
City:	State:	Zip Code:
Contact Number:		
Email Address:		
	he second page of this a	prrect. I agree that only the details and application may be made available to the
Signature of Parent/Guardian:		
Date:		

IDENTIFICATION CODE \_\_\_\_\_

Please provide a summary of the circumstances and details surrounding the need for the Work-4-Credit Program for the upcoming season, or year. Be specific but try not to exceed the one page typed or two pages written requirement. Make sure this page is attached to any additional pages needed. In order to insure your privacy the general information provided on the second page of this application will not be submitted at the time of review.



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