

EIP Application Part I, Required Information

1. Name:	
First Name	
Middle Initial	

2. High School

Last Name

High School Select your High School:

Other (if not listed above)

Please use correct capitalization, sentence structure, spelling and grammar in completing this application. Attention to detail is important to the successful application.

3. Application Submission Date

Today's date:

MM/DD/YYYY

4. If applicable, indicate the magnet, college, or fundamental program in which you are enrolled. (Identify by acronym such as AVID, IB, CWMP, ECP, EA, DE...)

5. Current Gra	ıde
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Current Grade

Current Grade:



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6. Address:

Mailing Address	
City	
State	
Zip Code	

7. Contact Information:

Home Phone	
Personal Cell Phone	
Other Phone (if applicable)	
Email Address:	

8. Please answer the following:

Last Four Digits of Social Security #	
Florida Student ID # (This is your 10-digit high school	I
student ID number than begins with 52.)	
SPC ID # (If you already have one)	
Date of Birth	
Sex (Male or Female)	
Race	
Do You Have Your Own Transportation?	



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9. List three different career fields that you would like to experience, in order of preference:

Career Field 1.	
Career Field 2.	
Career Field 3.	

10. The EIP dual enrollment course sequence is: SLS 1301 <u>(all</u> 1st-time EIP participants), SLS 1711 (fall, participants continuing from summer), SLS 1264 (spring, 2nd- and/or 3rd-time participants). Please check any courses previously completed.

SLS 1301 - Career and Life Planning

SLS 1711 - Peer Classroom/Laboratory Tutoring and Proctoring

1	SLS 1264 - Leadership Development Seminar

11. Check all semesters for which you are applying:

Summer

Fall

Spring

12. List any training or courses which you have had that would be useful in the professional areas listed above.

13. List any school and community activities, leadership roles, and honors you have received throughout grades 9-11.

14. List the teams, clubs, or work in which you will actively participate while enrolled in EIP.

15. Briefly state why you would like to be an Executive Intern.

16. Student and Parent Signature Sheet Upload - REQUIRED

Download the Student and Parent Signature Sheet from the EIP website. Complete it and prepare it for upload below.

Choose File

No file chosen



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17. Parent/Guardian Information. In case of emergency, contact:

Mother's Name	
Home Phone	
Work Phone	
Employer	
Position	
Father's Name	
Home Phone	
Work Phone	
Employer	
Position	



EIP Application Part I

Thank you for your interest in EIP and for submitting your application. Print this page for proof of timely application submission. Please continue to the EIP website on the EIP Application page for further instructions for your Guidance Counselor and Teacher References and due dates.

Visit: www.pcsb.org/eip