



IXOYE GLOBAL ENTREPRENEURSHIP NETWORK, Inc.

IXGEN Youth Empowerment Program (iYEP) 2017

REGISTRATION FORM

Participant Primary Contact Info

First Name: _____ Last Name: _____

Date of Birth _____ Age: _____ Gender: Male/Female **T-shirt size: S / M / L / XL / 2XL**

Address: _____ City: _____

State: _____ County: _____ Zip Code: _____

Email: _____ Phone: _____ Cell: _____

This application is completed by (Circle one of the following): Myself; Parent; Guardian; Teacher;
Counselor; Pastor; Other: _____

School Record

Name of current or last school attended: _____

City: _____ County: _____ State: _____

Years from: _____ To _____ Highest level attained: _____

GPA: _____

Emergency Contact

First Name: _____ Last Name: _____ Relationship: _____

Address: _____ City: _____

State: _____ Zip Code: _____

Email: _____ Phone: _____ H/W Cell: _____

Applications can be returned by:

Fax: (530) 658-5428

Email (Scan document): info@ixgeninc.org

Delivered: 1679 Columbia Drive, Decatur, GA 30032 (Mon., Wed., Thur., 11 AM – 2 PM) (Tentative).

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Payment Options

* Payment Methods: Check; Credit Card; Money Order; Cashier's Check; Cash

Total cost of the training is \$275 (including registration and workshops)

Registration is \$50.00, and can be payable in two payments in order to secure a space. A pre-payment of \$25 can be made to secure a space, and the balance plus training workshop fee is due by June 10th.

Training workshop fee of \$225 must be paid in full, unless covered by a scholarship.

Pre-Registration: \$ _____ Full Registration: \$ _____ Training Workshops: \$ _____

TOTAL PAYMENT: \$ _____

Completed registration forms with payment must be returned by 06/10/2017, latest.

***Make all payment to IXGEN, Inc.**

*Credit card and Cash payments can be accepted only on site.

* Check payment: make Check, Money Order or Cashier's Check to IXGEN, Inc., and mail to:
PO Box 1442, Lithonia, GA 30058

Registration can be done online at www.ixgeninc.org, or at Peace Lutheran Church, 1679 Columbia Dr., Decatur GA 30032 (call Church office 404.289.1474 to find out times).

If under 18, an adult should co-sign:

Signature: _____ Date: _____

Print Full Name: _____

Adult Signature: _____ Date: _____

Print Full Name: _____

Benefits: Participants will receive after registration, a branded T-shirt, a binder, training materials, handouts, two free snacks a day, transportation for local field visits, and a Certificate of Achievement at the end of the program. Those desirable, will be linked to a mentor for business startup.



**IXGEN Youth Empowerment Program (iYEP)
Application for iYEP Financial Assistance.**

Financial Assistance may be available for participants in real need. In order to be considered for assistance the applicant must complete this application along with the registration form and return both at the same time. Assistance may be in the form of a partial or full scholarship. Assistance may be provided depending on the availability of funds. The decision is at the complete discretion of the IXGEN management

Full Name: _____ Date of Birth: _____ Gender: M / F

Address: _____ City _____ Zip Code _____

Student eligibility criteria

- Enrolled in middle or high school (including home school) at the time of application
- Grade point average (GPA) of 2.5 or higher
- Maintain full-time status.
- Meets household financial criteria

Type of household (check one):

Single Parent (Male) Single Parent (Female) Married Couple Senior Citizen

Size of Household: _____ Own/Rent: _____

Average gross annual income of household: Circle one

Less than \$10,000 \$10,000 - \$25,000 Over \$25,000

Briefly describe your need for financial assistance:

Participant signature: _____

If under 18 an adult should also sign:

Adult signature: _____ Relationship: _____

Print Full Name: _____ Date: _____

Official Use Only

Name of applicant: _____

Approval status: Approved/Denied Amount of Scholarship: \$ _____

Decision by: _____ Date: _____