



DeHart 2023-2024 Application

By completing this application, you are confirming that you will, if accepted into this program, be able to participate in a two-month program that will occur between March 2024 and April 2024, Monday – Friday (except Federal holidays).

Name:	_____	Birthdate:	_____
Address:	_____	City/Zip:	_____
Phone	_____	Email	_____
Number:	_____	Address:	_____
Current High	_____		
School:	_____		

Session Preference (Depending on space, you *may* or *may not* receive your preferred time):

_____ 7:30-11:30 AM OR 12:15 PM-4:15 PM

Pathway you participated in while attending high school:

Why do you want to participate in the program offered by DeHart?

What makes you the best person/fit for this opportunity?

Emergency	Phone
Contact Name: _____	Number: _____

Submit your application no later than **Friday, February 9th at 12:00 PM** to your Career Navigator.