



**PATHWAY 2 SUCCESS**  
**2021-2022**  
**STUDENT APPLICATION**  
**Please print legibly**

The AUM Foundation’s Pathway 2 Success program offers opportunities for high achieving senior female high school students to gain academic support, enhance soft skills, experience post-secondary environments, and garner potential career insights. Its mission is to empower and support under-resourced female high school students for success, with the vision that those completing this program will be economically independent and socially responsible. [www.AUMFoundationusa.org](http://www.AUMFoundationusa.org)

**PROGRAM COMPONENTS**

- **Mentoring:** Each student is matched with a female mentor who is a professional working in varied career fields.
- **Enrichment Classes:** Each month there is a class that emphasizes various practical skills (finding scholarship and financial aid) or life skills (finance and budgeting, interviewing and resume writing).
- **ACT Tutoring:** Private ACT tutoring.
- **Job Shadowing Experiences:** Participants are offered at least two opportunities to shadow a professional in a career field of their choosing.
- **Financial Assistance:** Participants will receive a laptop and up to \$2,000 in scholarship money (\$200 per attended class attended) for the college or vocational school of their choice upon successful completion of the program.
- **Technology Assistance:** Participants who successfully complete the mentoring requirements will be gifted a laptop computer upon completing their senior year.

**PROGRAM ELIGIBILITY REQUIREMENTS**

- **Live and attend a public school in:**
  - Huntsville
  - Decatur
  - Madison City
  - Madison County
- **Applicant must be a female student entering her senior year**
- **GPA of 3.0 or higher**
- **At least one (1) Teacher recommendation required**
- **Household income must meet program requirements listed below:**

Pathway 2 Success		Qualification Income Guidelines	
Persons in Family/Households	Not to exceed total family Income		
1	\$ 31,900.00		
2	\$ 43,100.00		
3	\$ 54,300.00		
4	\$ 65,500.00		
5	\$ 76,700.00		
6	\$ 87,900.00		
7	\$ 99,100.00		
8	\$ 110,300.00		

Families/households  
with more than 8 persons, add \$4,420 for each additional person.



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School: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Cell number: \_\_\_\_\_ Home/Alt. Number: \_\_\_\_\_

Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact Name & Relationship: \_\_\_\_\_

Emergency Contact Phone #: \_\_\_\_\_

Emergency Email: \_\_\_\_\_

Student Birth Date: \_\_\_\_\_

Ethnicity:   •African American           •Asian           •Caucasian           •Hispanic  
                  •Indian •Native American           •Other: \_\_\_\_\_

Do you have any allergies or health concerns?   •Yes           •No

If yes, please explain: \_\_\_\_\_

Do you have reliable transportation?           •Yes           •No

Cumulative GPA: \_\_\_\_\_ Current ACT Score: \_\_\_\_\_

Mandatory forms to be completed and submitted together for Pathway 2 Success:

- 1. **Student Application: Completed, signed, and dated**
- 2. **School Transcript: Enclosed in a signed, sealed envelope from school**
- 3. **Parent Application: Completed, signed, and dated**
- 4. **Teacher Recommendation: Enclosed in a signed, sealed envelope from school**

**An official school transcript must be submitted with application**

**Application deadline is Sunday, February 28, 2021**

Student must submit all completed forms together to:  
AUM Foundation P2S, 472 Providence Main, Suite 202, Huntsville, AL 35806  
or email to  
[Demetria.horton@aumfoundationusa.org](mailto:Demetria.horton@aumfoundationusa.org)



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**Applicant Questionnaire**

The P2S Program matches you with a mentor. Please answer all the questions with as much detail as possible to ensure we make the best match for you. If more space is needed, use additional sheets of paper.

1. Apart from the scholarship, what aspects of the program do you feel will be most beneficial to you and why?

2. Do you see yourself pursuing higher education, and if so, where?

- Tech School    Junior College    Vocational/Trade School  
Four Year    Military    Other: \_\_\_\_\_

3. For Career exploration, please list the top 3 careers you are interested in by level of interest:

- 1.
- 2.
- 3.

4. Which activities are you involved in?

- a) Extracurricular non-school activities (church or community activities or clubs)
  
  
  
  
  
  
  
  
  
  
- b) School activities (clubs, sports, theatre, band, organizations)



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- c) What do you like doing in your spare time (hobbies, other)?
5. Would you describe yourself as an Introvert (shy, self-observer) or Extrovert (outgoing, life of the party)?
6. Describe your best friends' personality:
7. What motivates you in challenging situations?
8. Describe a situation where your persistence paid off:



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**Program Commitment**

*Please initial*

\_\_\_\_\_ I understand that if accepted into the program, I will be required to attend student orientation on **Thursday, May 27<sup>h</sup>, 2021**

\_\_\_\_\_ I understand that I am expected to communicate regularly and openly with program staff and mentor

\_\_\_\_\_ I understand that I will be required to meet 1-hour weekly with my mentor in order to earn a laptop computer for furthering my education.

\_\_\_\_\_ I understand that I will be required to attend each monthly class and will earn \$200 per class (10 classes x \$200 per class = \$2000) in scholarship money for furthering my education.

\_\_\_\_\_ I understand that I am required to complete 2 job shadowing sessions

\_\_\_\_\_ I understand that I am committing to the program for one year

\_\_\_\_\_ I understand that I am expected to be respectful to AUM Foundation staff, mentors, and guests.

By signing below, I attest to the truthfulness of all information listed on this application and agree to the above terms and conditions.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Forms to be submitted for Pathway 2 Success:**

- **Student Application: Completed, signed, and dated**
- **School Transcript: Sealed in envelope from school Office**
- **Parent Application: Completed, signed, and dated**
- **Teacher Recommendation: Sealed in envelope from school**

**Student must submit all completed forms together to:  
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Parent/Guardian Legal Name: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home phone: \_\_\_\_\_

Please list all members currently living in your household, including children living in the home on a rotation (weekends only or every other week):

Name	Age	Relationship to Applicant

Total number of Household Members: \_\_\_\_\_

Total household income \$ \_\_\_\_\_

**Application deadline is Sunday, February 28, 2021**

**Student must submit all completed forms together to:  
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 or email**

[Demetria.horton@aumfoundationusa.org](mailto:Demetria.horton@aumfoundationusa.org)



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**PARENT APPLICATION**

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**Parent Questionnaire**

*To be completed by Parent/Guardian*

*Please answer the following questions about your daughter. Use additional sheets if necessary.*

**1. Is your child currently experiencing any issues either at home or at school? If yes, please explain.**

**2. Has your child experienced any traumatic events (i.e., death in the family, abuse, divorce)?**

**a) If yes, please describe.**

**b) As a result of any of these events, is your child in therapy?**

**3. Can you provide any additional background information? Does she have any specific needs?**

**4. Do you believe your child can meet scheduling obligations including weekly mentor meetings and monthly classes? (see attached calendar for schedule)**



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**Contact and Information Release**  
*To be completed by Parent/Guardian*

**Student Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**School:** \_\_\_\_\_

*Please initial each statement and signed the bottom of the form.*

**I hereby grant permission for AUM Foundation Pathway 2 Success Program Representatives (P2S) to:**

- Contact my child and conduct a personal interview for the purposes of applying to be a program participant.
- Contact my child on school premises for the purposes of screening and interviewing as well as ongoing support of her participation in the Pathway 2 Success (P2S) program.
- Meet with my child at school during school hours for mentoring purposes.
- Allow my student to participate in Job Shadowing or Career Information sessions during and after school hours.
- Obtain needed information regarding my child from her school's staff, including academic and behavioral records and conversations with teachers, counselors, and other administrative staff.
- Share information about my child with those within the Pathway 2 Success organization
- I understand that my child will be required to participate in weekly meetings with their mentor and one (1) Life Enrichment class per month and I will support my child's participation. Classes are normally conducted on Sundays from 2 PM to 5:30 PM. I further understand that failure to attend these classes and mentor meetings may result in my child's expulsion from the program.
- I understand that I am required to have a phone or in person meeting with Aum staff prior to my child's acceptance into the program.
- I give consent for my child's name, likeness and speech in any audio, video or photograph made at any P2S activity to be used for public relations or fundraising purposes. I also give consent for any printed materials, artwork, stories, or quotes from my child to be used for public relations or fundraising purposes.

I understand that my child will be participating in various one-to-one activities with a volunteer mentor, and that he/she will be under that volunteer's supervision during those activities. I release AUM Foundation, its officers, agents, employees and volunteers from any and all liability, claims, demands or causes of action whatsoever that I may have as Parent/Guardian of this minor, for damage, loss or injury to him/her which may occur while participating in any of the activities contemplated in the P2S Program.

**I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.**

\_\_\_\_\_

**Parent/Guardian Signature**      **Date**      **Printed Name**