



Sustainable Environmental Training (SET) Application Form

Personal

Full name: _____
Last name First name Middle initials

Gender: _____ Title (Mr./Ms./Mrs./Other) _____

Address: _____
Street address Apartment/unit #

City State Postal code

Home phone: (____)_____ Cellphone: (____)_____

Email address: _____

Last 4 digits of SSN #: _____ Race: _____

18 years of age or older? (Y/N) _____ Do you have flexibility to travel? (Y/N) _____

Driver's License: (Y/N) _____ Do you have your own transportation? (Y/N) _____

Are you a veteran? (Y/N) _____ Marital status: _____

Do you have a GED or High School Diploma? _____

Highest level of education completed: _____

Currently employed? (Y/N) _____ Current Household Income: _____

Have you ever been convicted of a felony? (Y/N) _____

If yes, please explain and include dates: _____

Work History (two previous employers)

Employer 1: _____ Start & End Date: _____

Title: _____ Salary: \$ _____

Employer 2: _____ Start & End Date: _____

Title: _____ Salary: \$ _____

Emergency Contact

Full name: _____

Last name

First name

Middle initials

Address: _____

Street address

Apartment/unit #

City

State

Postal code

Primary phone: (____) _____ Cellphone: (____) _____

Relationship: _____

To be read and signed by Applicant

I authorize TWIN to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at a decision to participate in the SET Program. (Generally, inquiries regarding medical history will be made only if and after a conditional invitation to participate in the program has been extended.) I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application. In the event of acceptance into the SET program, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the SET Program. "I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) may be contacted, for investigating my performance history. I understand that I have the right to:

- Review information provided by current/previous employers;
- Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information."

I certify that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge

Signature: _____ Date: _____

Print name: _____

(Note: Please attach supporting documents outlined on the Applicant's Document Submission Form)

Applicant's Document Submission

Applicant must submit the following documentation (along with the application form) to TWIN prior to tryouts to be eligible to participate in the SET Tryouts. Completed application packets can be returned to TWIN via mail at TWIN, P.O. Box 12687, Charlotte, NC or via email to Dr. Tonia Thomas at tonnia@twinnonprofit.org.

- **Headshot**

(Current photo of applicant)

- **Proof of Residence**

(Proof may include one of the following: Birth Certificate, Driver's License, Learner's Permit, or DMV/State ID card)

- **Proof of Citizenship/Right to Work**

(Proof may include one of the following: Social Security Card, Birth Certificate, Passport, Permanent Residence Card (Green Card), or Voter's ID or work permit)

- **Proof of Household Income**

(Provide proof of the last 6 months pay for each working member of applicant's family (paystubs) that currently lives with the applicant OR proof of public assistance)

- **Proof of School Records**

(Submit most recent diploma, transcript, or GED record)

- **Proof of Veteran Status**

(Veteran ID card, if applicable)

- **Need Assessment**

(Check the appropriate box below if transportation or childcare services are needed to participate in an offsite training program. Sign your name below and return with your application form).

If selected for the SET Program, I would need bus passes to get to and from class.

If selected for the SET Program, I would need childcare services to participate in the program.

Applicant Name: _____ **Date:** _____



Sustainable Environmental Training (SET) Program

Photo and Video Release Form

I, _____ hereby grant Training to Work an Industry Niche, its directors, officers, employees, agents, and designees (collectively "TWIN") non-revocable permission to capture my image and likeness in photographs, videos, recordings, or any other media (collectively "Images").

I hereby grant permission to TWIN to copyright, display, publish, distribute, use, modify, print and reprint any such Images for TWIN's educational or promotional purposes, including without limitation, publications, advertisements, brochures, web site images, or other electronic displays and transmissions thereof. Such Images shall be solely owned by TWIN.

I hereby waive any right to inspect or approve such Images that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the Images.

I hereby agree to release and hold harmless TWIN from and against any claims, damages, or liability arising from or related to the use of the Images, including but not limited to any reuse, distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise, that may occur or be produced in production of the finished product.

I am 18 years of age or older, and I am competent to make a legal contract in my own name. I acknowledge that prior to signing this release I have had an adequate opportunity to read and understand it, and any questions I have had have been directed to TWIN and have been answered to my satisfaction. This Release will remain in full force and in effect until withdrawn in writing by me.

Applicant Signature: _____

Date: _____



Sustainable Environmental Training (SET) Program

SET TRYOUT WAIVER FORM

I understand that my decision to participate in Tryouts for the Sustainable Environmental Training (SET) Program is entirely voluntary. However, I understand that while I am participating in tryout activities, that there is a risk of illness or injury. I acknowledge that TWIN, it's officers, agents and/or affiliates are not liable for any injuries or harm done to my person during or thereafter, my participation in the two-day tryout process. I understand that there is an exercise portion of the tryouts and I am responsible for my own well-being. I have been informed of the advisability of seeking medical consultation with my personal physician prior to engaging in any such activities.

I hereby waive all claims, causes of action, right to entitlements, suits or damages against TWIN, it's officers, agents and/or affiliates because of, or in conjunction with my participation in tryouts.

I verify that I have no physical disabilities, impairments or chemical dependencies that may inhibit my participation in the SET Tryout activities. I do not know of any medical reasons why I should not participate in this tryout for the SET program. I hereby accept and assume the risk of injury and understand the possible consequences of such injury.

I, the undersigned, have carefully read this document in its entirety, and fully understand it and sign this as a free, knowing and voluntary act.

Emergency Contact

My emergency contact's information is:

Name: _____

Address: _____

Phone: _____

Applicant's Signature

Date

TWIN Staff Signature

Date