

PROFESSIONAL OPPORTUNITIES PROGRAM FOR STUDENTS, Inc. (POPS)

- Professional Opportunities Program for Students, Inc., "POPS" is a non-profit community-based organization, which started in Orlando in 2001.
- The mission of POPS is to provide personal and professional development for teenagers who face social and economic barriers that impact their quality of life.
- POPS' motto is *"Building Character In Teens To Believe And Succeed."*
- The goal of the POPS program is to prepare the students for future success.
- POPS' focus is to assist these students in the completion of high school, and to motivate them to pursue advanced education and gainful employment.
- POPS has a three-star approach to its mission and focus: One: Character Building; Two: College and Career Exploration; and, Three: Community and Civic Responsibility.
- POPS' work is rooted in collaboration among students, parents, schools, and community and business leaders.
- While POPS is headquartered in Orlando, the program is being expanded beyond Orlando to several other locations, including, St. Petersburg, Ft. Lauderdale, Jacksonville, Tallahassee, Bartow/Lake Wales, Pahokee, and Miami-Dade.
- The program is a year- round program which offers the students the opportunity to participate in various activities, including mentoring sessions, college recruitment fairs and campus tours, community service projects and summer internships.
- In addition, students attend monthly workshops which offer a relevant curriculum addressing topics such as "Goal Setting", "Financial Management", "Health Awareness", "Embracing Diversity", "Team Building", "Dressing for Success", "Work Readiness", and "Verbal and Non-Verbal Communication", and, "Time and Stress Management."
- In addition to providing the students educational counseling and developmental skills training, POPS also provides the students a work-site learning placement in professional workplace environments for eight weeks during the summer. Students are awarded stipends during their participation in the summer internships.

For additional information about the POPS program, please contact: **Dr. Regina Bryant**, POPS District Manager for Tallahassee at (850) 556-8185 or reginab2@yahoo.com



Professional Opportunities Program for Students, Inc.

POPS APPLICATION 2010 - 2011

Student's Name _____
Last First Middle (Complete)

School Name _____ Grade Level (10) (11) (12) Age _____
Please circle one

Career Interest _____
1st 2nd

Email Address _____ D.O.B: _____ Gender: M F

Home Address _____
Number and Street Apartment #

City: _____ State: _____ Zip: _____

Permanent Home Phone () _____ Cell Phone () _____
Area code Area code

Citizenship US Citizen
 Dual US citizen; please specify other country of citizenship _____
 US permanent resident visa; Citizen of _____ Alien registration # _____

Language(s) spoken at home _____

Please check all that apply:

- African American/Black
- Hispanic/Latino
- Caucasian/White
- American Indian
- Asian
- Other (Specify _____)

(Legal) Parent(s) or Guardian Name 1. _____

Contact numbers: Home _____ Work _____ Cell _____

(Legal) Parent(s) or Guardian Name 2. _____

Contact numbers: Home _____ Work _____ Cell _____

Do you have transportation to and from events and summer internship sites? Yes No

How many people live in your household? _____

What is your family's income range?

0-\$20,000 _____ \$ 20,001-\$35,000 _____ \$35,001-\$45,000 _____ \$45,001-Above _____

Have you ever been arrested? Yes No

If yes, were you charged with a felony? Yes No

List your cumulative GPA: _____ List the total number of credits you have earned: _____

Do you currently receive Free or Reduced Lunch? Yes No

PLEASE ATTACH A ONE PAGE ESSAY WHICH ADDRESSES ALL OF THE FOLLOWING:

- Why you should be selected to participate in the POPS Program
- What you expect to gain from the POPS experience
- How you will apply what you gain from the program to your life

****I understand that my child's involvement in the POPS program may require a background check and drug testing and I give my permission for the POPS program to obtain this information. I also understand that my child may be photographed or videotaped for POPS related events and I give my permission to use these images or likeness for POPS collateral and or media distribution.**

Student Signature

Date

(If under 18) Parent Signature

Date

All applications must be returned to the POPS office

Applications are accepted on an on-going basis. All requested items must accompany the application or the application will be considered incomplete. Incomplete applications will not be accepted.

Interviewed by: _____ Date: _____ Time: _____