

M.I.N.D. Your Own Business
Making Impact Negotiating Decisions
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"PAY IT FORWARD" PROGRAM

I, the undersigned, am thankful for assistance given to me in reaching my educational and career goals. Therefore I am willing to donate hours to help others reach their goals as well.

My volunteer hours will be required after I have finished my prescribed program. In some cases, hours may be performed concurrent with program hours, e.g., a GED student may volunteer to help with C.A.S.S. Camp or tutoring homework students.

I promise M.I.N.D. Your Own Business 10 hours or more of volunteer work within the next few months.

Signed _____ Date _____ Address _____ Phone _____

Program Hours

Date _____ Hours _____
Date _____ Hours _____
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Volunteer Hours

Date _____ Hours _____
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EDUCATION, EMPLOYMENT & EMPOWERMENT