

Hello,

My name is Freddie Middlebrooks. I am the Director of Educational Activities for Alpha Phi Alpha, Theta Eta Lambda chapter located in St. Petersburg. This letter is regarding your interest in our organization's Project Alpha program. Project Alpha is a national program of our organization that focuses on mentoring young men in our community. We discuss various topics such as physical/mental health, sex education, college applications and scholarship opportunities, and various other topics to help guide young men on their journey in life. These discussions and workshops will be led by prominent professionals, distinguished community leaders, and experts in their field. Activities are design to be educational and fun while building lifetime brotherhood and mentorship.

If you would like to participate in our Project Alpha curriculum, please fill out the application below. A date, time, and location will be provided for all meetings. If you have any questions, please contact us alphatel1962@gmail.com.

Sincerely,

Brother Freddie Middlebrooks

Director of Educational Activities

Alpha Phi Alpha Theta Eta Lambda

727-644-8010

**ALPHA PHI ALPHA FRATERNITY, INC.**

**THETA ETA LAMBDA CHAPTER**

**ALPHATEL1962@GMAIL.COM**

**PROJECT ALPHA STUDENT INFORMATION FORM**

**STUDENT NAME**

 **First Middle Last**

**ADDRESS**

 **Street Apt. # City Zip**

**SCHOOL** **GRADE** \_\_\_\_\_\_\_

**STUDENT E-MAIL**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **STUDENT’S PHONE**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**D.O.B.**  / / **AGE**\_\_\_\_\_\_\_\_

**PARENT/GUARDIAN NAME**

**PHONE NUMBER** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT E-MAIL ADDRESS**

**WHAT DO YOU HOPE TO LEARN FROM THE PROGRAM?**

**WHAT TOPIC(S) WOULD YOU LIKE TO DISCUSS IN THE PROGRAM?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LIST ANY AWARDS, GRADES, HONORS, SCHOLARSHIPS OR ACHIEVEMENTS HAVE YOU MADE THUS FAR IN YOUR SCHOOL, COMMUNITY OR CHURCH?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**WHAT ARE YOUR GOALS AFTER HIGH SCHOOL?**

**WHAT IS YOUR CAREER OR JOB INTEREST?**

**STUDENT SIGNATURE** **PARENT SIGNATURE**

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(For Staff Use Only)

Referring Person Title

School Phone Date

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(For Staff Use Only)

Receiving Person Interview Date:

 Accepted Not Accepted (Reason)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_