

## Circle Leader Training Class Application 2018

Contact Information							
Name							
Address							
Home and/or Cell Phone							
Work Phone							
E-Mail Address							
Housing Status							
What is your current housing situation?	<table style="width: 100%; border: none;"> <tr> <td>Rental House _____</td> <td>Rent To Own _____</td> </tr> <tr> <td>Rental Apt _____</td> <td>Buying House _____</td> </tr> <tr> <td>With Family _____</td> <td>Owned House _____</td> </tr> </table>	Rental House _____	Rent To Own _____	Rental Apt _____	Buying House _____	With Family _____	Owned House _____
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With Family _____	Owned House _____						
Are you associated with West Orange Habitat for Humanity?	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><b>Yes</b> _____</td> <td style="text-align: center;"><b>No</b> _____</td> </tr> </table>	<b>Yes</b> _____	<b>No</b> _____				
<b>Yes</b> _____	<b>No</b> _____						
If you checked "Yes", please indicate which stage you are in.	<table style="width: 100%; border: none;"> <tr> <td>On Future Habitat Waitlist</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Habitat Home In Construction</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Living In Habitat Home</td> <td style="text-align: right;">_____</td> </tr> </table>	On Future Habitat Waitlist	_____	Habitat Home In Construction	_____	Living In Habitat Home	_____
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Living In Habitat Home	_____						
If known, please tell us what location your Habitat Home will be in.							

## Availability

The dates and times of the next Circle Leader Training Class will be October 7<sup>th</sup> to December 2<sup>nd</sup> 2018, Sundays from 2 pm – 6 pm.

Are you available to attend this upcoming Circle Leader Training Class?

Yes \_\_\_\_\_

No \_\_\_\_\_

If you checked “**No**”, you may still complete this form for the next available Circle Leader Training Class.

Please Initial below that you understand that the Circles Staff will hold your application and contact you with dates and times for the next Class. If you have open availability for those dates and times, this application will be valid and you may proceed with the next steps.

Initials \_\_\_\_\_

## Child/Youth Care

Do you have children?

Yes \_\_\_\_\_

No \_\_\_\_\_

Will you need child/youth care during the Circle Training class?

Yes \_\_\_\_\_

No \_\_\_\_\_

If “**Yes**”, how many children will you bring and what are their ages?

How Many? \_\_\_\_\_

What Ages? \_\_\_\_\_

**If you had a magic wand, what would you change about your life over the next 18 months?**

**What do you hope to accomplish by participating in the Circle Leader Training Class?**

**What is your current understanding on what it means to get ahead in life?**

**What are you really good at (talents, gifts, skills...)?**

**What three things would you like to learn in order to help you reach your goals?**

**Thank you for completing this application form and for your interest in  
Participating in the Circle Leader Training Class!**

**Please complete and return to:  
Attn: Circles Orange County  
St. Luke's United Methodist Church  
4851 S. Apopka-Vineland Road  
Orlando, FL 32819**

**You can contact the Circles Coach at [tkelly@st.lukes.org](mailto:tkelly@st.lukes.org) to discuss, turn in forms and  
discuss any questions you have about the Circle Leader Training Class.**

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**Lead Organization: St. Luke's United Methodist Church  
4851 South Apopka-Vineland Road, Orlando, FL • 407.876.4991 • [www.st.lukes.org](http://www.st.lukes.org)**