



Location Application & Agreement

Location Information

SCHOOL: _____ DISTRICT: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: _____ FAX: _____

PERCENTAGE OF FREE AND REDUCED LUNCHES _____

Volunteer Program Leader Information

The Leader Mom's role includes assuring the smooth implementation of the speaker series by securing appropriate meeting room space and serving as a link between schools and participants.

PROGRAM LEADER NAME: _____

PHONE NUMBER (REQUIRED): _____ EMAIL (REQUIRED): _____

Readiness to Participate Criteria

While Girls in the Know® provides almost everything needed to run the speaker series, the location is required to provide the following:

- Provide a school contact (usually the School Counselor): _____
- Provide an appropriate meeting space that includes a **dry erase board, tables & chairs.**

Briefly describe the space: _____

- Provide a school area where the speaker series supply kit will be stored (counselors office): _____
- Identify participants. Distribute flyers to all girls (ages 9-13) in the appropriate grades. How many flyers will you need so that EVERY GIRL at your school who is between 9-13 can receive a flyer? _____

Briefly describe your recruiting (back to school night, newsletter, social media, etc.)

- If multiple speaker series are formed, select a Leader Mom for each session.

Please have school principal or site liaison sign below indicating his/her acknowledgement and awareness that GITK will be delivered at your school:

X _____

Speaker Series Meeting Information

Would your location like to be considered for more than one session (up to 20 mother/caregiver-daughter pairs per session)? _____

If yes, how many sessions of 20 mother/caregiver-daughter pairs can your site accommodate (considering meeting room facilities)? _____

Please choose one day per week and the time the mother/caregiver-daughters will meet for a one hour session for 4 weeks.

Group 1-Days: _____ Time (i.e., 6:30-7:30 p.m.) _____

Group 2-Days: _____ Time (i.e., 6:30-7:30 p.m.) _____

Start date of program: _____ End date: _____

Program Fees

Program fees are \$125 per mother/caregiver-daughter. We want GITK to be accessible to ALL mother/caregiver-daughters. Need-based scholarships are available for program fees for individuals who cannot afford the individual program fee. Families requiring scholarships can fill out an application to be reviewed by our board of directors, submit to: gina@girlsintheknow.org

Included in the fee price are:

- ✓ sessions conducted by certified female professionals in their field
- ✓ handouts to accompany each session
- ✓ official GITK t-shirt
- ✓ participation in the Celebration Event
- ✓ program completion certificate

I have read and understand my responsibilities as a GITK Program Leader Mom:

X _____

**MAIL or SCAN & EMAIL application to:
Gina Marten (gina@girlsintheknow.org)
Girls in the Know
Attn. Site Application
312 Central Place St. Louis, MO 63122**

Please direct any questions you may have to GITK Executive Director, Gina Marten (314) 717-1270 or gina@girlsintheknow.org