

# PROJECT R.A.C.E. PARTICIPANT APPLICATION



Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

SCHOOL: \_\_\_\_\_

GPA: \_\_\_\_\_

GRADE: \_\_\_\_\_

Age: \_\_\_\_\_

D.O.B: \_\_\_\_\_

Sex: \_\_\_\_\_

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Are you a citizen of the U.S.A.? \_\_\_\_\_

Are you authorized to work in the U.S.A.? \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_

State license issued in: \_\_\_\_\_

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Are you fluent in any language other than English? \_\_\_\_\_

Language: \_\_\_\_\_

Do you require any special accommodations due to a health condition or impairment?

\_\_\_\_\_

Have you ever been convicted of any legal violation other than minor traffic violations?

\_\_\_\_\_

\_\_\_\_\_

## Emergency Contact Information

Full Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Have you had any previous employment experience?

\_\_\_\_\_

Please describe your duties:

\_\_\_\_\_

\_\_\_\_\_

How did you hear about Project R.A.C.E.?

\_\_\_\_\_

What services are you interested in?

\_\_\_\_\_

Project R.A.C.E. requires its participants to pledge to a substance abuse free lifestyle. To participate in Project R.A.C.E. the applicant will be subject to a urinalysis. The result of this



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analysis will not bar the applicant from receiving services through Project R.A.C.E. All analysis results will be kept confidential. However, Project R.A.C.E. cannot assist with job placement for any applicant that tests positive for any substance use. Further, any legal convictions will not bar an applicant from participation in Project R.A.C.E.

**Acknowledgement, Pledge and Release of Liability:**

I agree to abide by the established rules and understand the requirements for participation in Project R.A.C.E. I understand that all my information will remain confidential and will only be available to the staff at Project R.A.C.E. to determine services provided to me. I pledge to live a substance abuse free life and engage with Project R.A.C.E. staff members for mentorship and guidance to maintain a substance abuse free lifestyle.

Project R.A.C.E. Participant and their legal guardian, including their heirs and assigns agree that they will release, forever discharge, indemnify, defend, and hold Project R.A.C.E. and its assigns and the City of Espanola and its assigns, harmless from any and all claims arising from the Participant’s participation in Project R.A.C.E. Agreement including but not limited to any and all damages whatsoever kind or nature.

(If Participant is under the age of 18 years old then Legal Guardian signature is required)

Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Project R.A.C.E. \_\_\_\_\_ Date: \_\_\_\_\_

Program Manager: \_\_\_\_\_ Date: \_\_\_\_\_

