



Little Big Horn College
Workforce Innovation and Opportunity Act
SUMMER YOUTH PROGRAM 2026

Student:

Full Legal Name: _____

Address: _____

Telephone Number: _____ **Age:** _____ **D.O.B** _____

Gender: ___ Male ___ Female **Students Email Address:** _____

Tribal Affiliation: _____ **District:** _____

Previous WIOA Participant: Yes No **Year:** _____

Current Grade Level for Academic Year 2024-2025:

___ 8TH ___ 9th ___ 10th ___ 11th ___ 12th **Academic Year Graduated:** _____

College: ___ 1st yr. ___ 2nd yr. **Undergraduate:** ___ 1st yr. ___ 2nd yr. **Graduate Student:** _____

Name of Your School: _____

GED: Month/Year Graduated: _____ If not a graduate, last year attended: _____

Summer School: Are you currently in a credit recovery program? Yes No

If yes, please list date/time: _____

Work Experience

Do you have any type of work experience? Yes No

If yes, please complete the information below for the last two jobs you have held. Start with most recent position.

Job Title: _____ **Dates of Employment:** From: _____ To: _____

Company: _____ **Supervisor:** _____ **Phone:** _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Reason for Leaving: _____ **Hourly Wage:** _____ **Hours/Week:** _____

CAREER EXPLORATION NARRATIVE

The career narrative is a three-paragraph essay with a one-page minimum. It is to be typed in MLA format and double-spaced, in first person point of view (I, me, my pronouns). The topic is YOU – your interests, hobbies, plans after graduation, etc.

First paragraph: *Introduce yourself.*

- Who are you? Where do you come from?
- What are your hobbies/interests?

Second paragraph: *Achieving your goals.*

- Who do you want to be when you grow up?
- Who is your role model?

Third paragraph: *Future plans.*

- Do you see yourself attending college or furthering your education? Why?
- How would you help or better the community you live in?

Conclusion:

What do you hope to gain out of the Little Big Horn College Summer Youth Program?

Please note: This essay is a required document that allows Little Big Horn College WIOA Program selection committee to understand your commitment and interest towards completing the summer youth program. Applicants that do not complete a Career Exploration Narrative, will be moved to the bottom of the list. If you have any questions or concerns about the career narrative, please contact the LBHC WIOA Youth Coordinator.

Teanna Braine. brainet@lbhc.edu.

All applicants and parental/guardians must read the following statement and sign below:

If selected, I/We understand and fully commit to the LBHC Summer Youth program and will participate in all activities - abide by the guidelines and policies set forth by the program and LBHC.

Media Release Form: I understand that my child's image may be captured on video and/or photographed during events, activities, either by the sponsor or by media organizations associated with LBHC WIOA Program. Media in attendance at the events. I understand that all images or statements recorded, videoed or photographed will be reserved by sponsors, for records and for future promotional purposes.

Student Signature: _____

Parent Signature, if under 18: _____

Date: _____
