

LEARNING GENERATION INITIATIVE  
APPLICATION FOR SPONSORSHIP  
GED PREPARATION

Name:

Date:

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

\_\_\_\_\_  
City

\_\_\_\_\_  
State Zip

Phone:

Last school attended: \_\_\_\_\_

Last grade completed: \_\_\_\_\_

Why I want my GED (100 words):

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Three goals for my future:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_