## **CORE COMMUNITY**



A CITY OF ROSWELL EDUCATION (CORE)
PROGRAM FOR RESIDENTS & BUSINESS OWNERS

PROGRAM APPLICATION		
Please See Reverse for Eligibility Requirements.		
Name :		
Home Address :		
City/State : ZIP Code :		
Select One: Roswell Resident Roswell Business Owner Both		
E-Mail:		
Phone:		
*Date of Birth :		
*GA Driver's License # : *Exp. Date .		
*Gender: Female Male  *Needed for background check. See reverse for more information.		
Why do you want to participate in the CORE Community program?		
List any past or current community-involvement activities within the City of Roswell.		
What questions would you like to have answered/what specific City services/areas would you like to learn more about as a participant?		

## **CORE COMMUNITY**

PROGRAM APPLICATION (CONTINUED)



By submitting this application, you (the applicant) hereby certify that there are no willful misrepresentations, omissions, or falsifications on this application. You (the applicant) understand that any omission or false statements on this application shall be sufficient cause for rejection for enrollment or dismissal from the City of Roswell's CORE Community Program.

You (the applicant) also hereby confirm that you meet the eligibility requirements for the program, that you understand that only one person from a household can participate in the CORE Community program at a time, and that you are:

- A resident of Roswell or the owner of a registered business in the City of Roswell.
- 18 years of age or older.
- Not running for political office during the program.
- Not involved in active litigation against the City of Roswell.

You (the applicant) understand that, if selected for enrollment, you will pledge the time commitment to attend all CORE Community sessions.

You (the applicant) further agrees to allow the Roswell Police Department to conduct a criminal history background check. The background check is necessary because the program invites participants into City facilities where they might be exposed to potentially sensitive information or equipment.

You (the applicant) understand that upon acceptance to the program, you will be asked to sign a liability waiver and photo/media release form.

## **PROGRAM SCHEDULE**

The program will run from Aug. 14 to Oct. 30, 2024. Please review the program dates to be sure you can commit to attending.

Each session focuses on a particular City department.

All sessions will be on Wednesdays, **6:00 to 9:00 p.m. (dinner included).** 

- Session 1: Wednesday, Aug. 14, 2024
- Session 2: Wednesday, Aug. 21, 2024
- Session 3: Wednesday, Aug. 28, 2024
- Session 4: Wednesday, Sept. 11, 2024
- Session 5: Wednesday, Sept. 18, 2024
- Session 6: Wednesday, Oct. 2, 2024
- Session 7: Wednesday, Oct. 9, 2024Session 8: Wednesday, Oct. 23, 2024
- Session 9: Wednesday, Oct. 30, 2024

Print/Type Name :	
Signature :	
8 111	
Date:	



E-mail completed application (as PDF, scan, or photo of front and back) to Elissa Brown, Communications Specialist, ebrown@roswellgov.com