



Name \_\_\_\_\_

Home Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## DEMOGRAPHICS

Are you a Bellevue resident?  Yes  No      Do you work in Bellevue?  Yes  No

<p><b>Age demographic:</b></p> <input type="checkbox"/> Under 18 <input type="checkbox"/> 18-44 <input type="checkbox"/> 45-64 <input type="checkbox"/> 65 or older <input type="checkbox"/> Prefer not to answer	<p><b>Gender Identity:</b></p> <input type="checkbox"/> Female <input type="checkbox"/> Gender Neutral <input type="checkbox"/> Intersex <input type="checkbox"/> Male <input type="checkbox"/> Queer <input type="checkbox"/> Trans <input type="checkbox"/> Not listed (please specify): _____	<p><b>What is your race/ethnicity?</b> (Choose all that apply)</p> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic, Latino or Spanish origin <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Not listed (please specify) _____ <input type="checkbox"/> Prefer not to answer
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Occupation: \_\_\_\_\_

Do you need a fee waiver for the tuition of \$150?  Yes  No

How did you hear about Bellevue Essentials? \_\_\_\_\_

## APPLICATION INSTRUCTIONS

Please answer each question **thoroughly in approximately 100 words per question**. Assistance with your application/essays is available on request. Contact Julie Ellenhorn at [jellenhorn@bellevuewa.gov](mailto:jellenhorn@bellevuewa.gov) to request assistance and please indicate if you have a language or culture preference.

**Essays can be typed or written and attached as a separate word document or verbally in an MP3 audio file emailed to [jellenhorn@bellevuewa.gov](mailto:jellenhorn@bellevuewa.gov). Maximum of 100 words per question.** If you prefer to send hard copy, mail to Julie Ellenhorn, City of Bellevue, Neighborhood Outreach, 450 110th Ave NE, Bellevue, WA 98004.

### Question 1: How have you been involved in your community?

(In approximately 100 words, share where you have volunteered such as government, school, faith community or community service organizations and how it has impacted you.)

### Question 2: Why do you want to participate in Bellevue Essentials and how do you hope to further your involvement or impact at the city or in your community?

(In approximately 100 words, be specific and provide details such as education, establishing connections, what you hope to do when you finish Bellevue Essentials)

### Question 3: What would you like to share about your background, character or life experience that would make you a contributing member of the Bellevue Essentials class?

(In approximately 100 words, share your cultural background, occupation, skills, hobbies, community relationships, etc.)

For alternate formats, interpreters, or reasonable accommodation requests please phone at least 48 hours in advance 425-452-5372 (voice) or email [jellenhorn@bellevuewa.gov](mailto:jellenhorn@bellevuewa.gov). For complaints regarding accommodations, contact City of Bellevue ADA/Title VI Administrator at 425-452-6168 (voice) or email [ADATitleVI@bellevuewa.gov](mailto:ADATitleVI@bellevuewa.gov). If you are deaf or hard of hearing dial 711. All meetings are wheelchair accessible.