



2014 BELLEVUE ESSENTIALS APPLICATION

Name _____

Home Address _____

City _____ State _____ Zip _____

Phone _____ email _____

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

OPTIONAL

Gender _____ Age _____

Ethnic background _____ Neighborhood _____

I am requesting financial assistance Yes

ESSAY QUESTIONS: Attach up to one additional page to answer the following questions.

Why are you seeking admission to this program?

How do you hope to utilize your experience for the benefit of the community?

If admitted, I commit to attend a minimum of 80% of the scheduled sessions.

Applicant Signature _____

Please submit your .pdf application to: jellenhorn@bellevuewa.gov

or mail your application to: Julie Ellenhorn
City of Bellevue
Neighborhood Outreach
450 110th Ave. NE
Bellevue, WA 98004

Applicants will be selected based on identification as emerging leaders, geographic diversity, personal goals of participation and Bellevue residents will receive priority.

Application Deadline is July 15, 2014.

Reset

Submit