



843.258.1135



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Community Office  
5627 Rivers Avenue  
North Charleston, SC 29406

www.526LowcountryCorridor.com

## I-526 Lowcountry Corridor WEST Professional Development Program

Dear High School/College Students:

The I-526 Lowcountry Corridor WEST Professional Development Program is a six-week program sponsored by the South Carolina Department of Transportation and the Federal Highway Administration. The program will be administered by Microburst Learning LLC and will **begin October 9, 2021**. All training sessions will be held virtually and students attending school in the Charleston County School District are permitted to use their Chromebooks.

The goal of the program is to enhance employment opportunities for high school and college students in the transportation industry. The objectives of the program are to address work ethics, leadership skills, and career opportunities.

Program participants will receive a stipend of \$500.00 upon successful completion of the program. Participants must attend all sessions and complete all required reports to receive the full amount of the stipends. Stipends will be prorated based upon the number of absences.

Program participants must reside in one of the following neighborhoods in North Charleston, South Carolina: Ferndale, Highland Terrace/Joppa Way, Liberty Park and Russelldale. The participants must currently be in high school or college; 16 years of age or older; in good academic standing (2.0 or better); and recommended by an instructor, principal, and/or guidance counselor. Each applicant must submit a one-page, typed, single-spaced, 12-pitch font essay describing how participating in the program will contribute to their career aspirations.

Only completed applications will be considered for the program. Please refer to page 2 for instructions on completing the application. **Applications must be received by September 24, 2021**. Please forward the completed application to the following address:

I-526 Lowcountry Corridor Project  
Community Office  
5627 Rivers Avenue  
North Charleston, SC 29406

If additional information is needed, please contact:

Horrace Tobin, Manager  
I-526 Lowcountry Corridor Community Office  
843.258.1135

## I-526 Lowcountry Corridor WEST Professional Development Program

**To be eligible, the following conditions must be met:**

- Participant must currently be in high school or college
- Participant must be 16 years of age or older
- Participant must have an overall grade point average of 2.0 or better
- Participant must reside in one of the following neighborhoods:
  - Ferndale
  - Highland Terrace/Joppa Way
  - Liberty Park
  - Russelldale

**Please ensure that the following documents are completed and signed by the participant and/or parent/guardian**

- Application completed and signed by student
- Permission Form completed and signed by parent/guardian
- Participant Agreement signed by student
- Contractual Agreement signed by student

**Please ensure that the following information is included as a part of your application packet:**

- One-paged, typed, single-spaced, 12-pitch font essay on *“How will participating in the I-526 Professional Development Program contribute to your career aspirations?”*
- One (1) letter of recommendation *on official school letterhead* from an instructor, principal, or guidance counselor.
- *Official copy* of student’s transcript to verify grade point average.

**Only complete applications will be considered.**

***The deadline for receiving applications is September 24, 2021.***

## I-526 Lowcountry Corridor WEST Professional Development Program Application

Student Name \_\_\_\_\_ Age \_\_\_\_\_ Grade/College Level \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Social Security Number \_\_\_\_\_ Overall GPA \_\_\_\_\_

If enrolled in college, what is your major? \_\_\_\_\_

Please provide a brief history of previous employment (full or part-time) as follows:

Employer	Position	Dates		Supervisor
		Start	Finish	

Do you require a special accommodations?     YES     NO

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please enclose the following documents:

- A letter of recommendation on official school letterhead from one of the following:
  - School Principal
  - School Counselor
  - Instructor
- A copy of your most recent report card/transcript.
- A one-page, single-spaced, 12-pitch font essay addressing how participating in the I-526 Professional Development Program will contribute to your career aspirations.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**I-526 Lowcountry Corridor WEST  
Professional Development Program  
Contractual Agreement: Employer & Student**

**STUDENT RESPONSIBILITIES** - The participating student agrees to:

- Display honesty, punctuality, courtesy, a cooperative attitude, good grooming habits, appropriate dress, and a willingness to learn.
- Conform to the rules and regulations of the I-526 Lowcountry Corridor WEST Professional Development Program.
- Complete all necessary reports.
- Be responsible for his/her transportation to and from the training facility.

\_\_\_\_\_

Student

\_\_\_\_\_

Date

\_\_\_\_\_

Program Director

\_\_\_\_\_

Date

**I-526 Lowcountry Corridor WEST  
Professional Development Program  
Participant Agreement**

**STUDENT PARTICIPANT**

Name \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Phone \_\_\_\_\_ Social Security Number \_\_\_\_\_

Email \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_

1. A stipend will be paid for participation in the Professional Development Program. The stipend will be paid by the contractor, who will be reimbursed by the South Carolina Department of Transportation for 100% of the student's stipend not to exceed the agreed upon amount.
2. The participant must remain an active participant until the end of the program.
3. This agreement may be terminated after consultation with the Project Director for due cause.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Director

\_\_\_\_\_  
Date

**I-526 Lowcountry Corridor WEST  
Professional Development Program  
Permission Form**

**TO BE COMPLETED BY PARENT(S) OR GUARDIAN (If applicable)**

My child, \_\_\_\_\_, has my permission to participate in the I-526 Lowcountry Corridor WEST Professional Development Program beginning \_\_\_\_\_ and ending \_\_\_\_\_.  
Name of Student Participant Date

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

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

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Please note that photographs will be taken throughout the Professional Development Program. The photographs will be used by the South Carolina Department of Transportation (SCDOT), Federal Highway Administration (FHWA – South Carolina Division Office) and Microburst Learning, LLC for publicity in publications (reports) and on websites. Please indicate below if SCDOT, FHWA, and Microburst Learning, LLC, have your permission to photograph your student:

SCDOT, FHWA, and Microburst Learning, LLC **have my permission** to photograph my child and use the image for publicity in publications and on websites.

SCDOT, FHWA, and Microburst Learning, LLC **DO NOT have my permission** to photograph my child and use the image for publicity in publications and on websites.

\_\_\_\_\_  
Parent (*Print Name*)

\_\_\_\_\_  
Parent (*Signature*)

\_\_\_\_\_  
Date