



Arizona Stitch Lab Application

Personal Information

First Name: _____ Last Name: _____
Date of Birth: _____ Address: _____
City: _____ State: _____ Zip: _____
Telephone/Cell: _____ Email: _____

Are you a member of a
federally recognized
tribe?

Yes

If you have selected yes, state the name of the federally recognized tribe:

No

Demographics

Sex: Female
 Male

Income: Below \$14,999
 Between \$15,000 -
\$24,999
 Between \$25,000 -
\$34,999
 Above \$35,000

Race/Ethnicity: _____

Wages before training program: _____

Highest level of education obtained:

Employment
Status:

Employed

Retired

Unemployed

Disabled

Self-Employed

Job History

Current / Recent Employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Dates Employed: _____ To _____

Enrollment

Select all training tracks you are interested in participating:

Basic Industrial Sewing Skill Course Cohort #: _____ (Visit our website to view deadline information)

Entrepreneur Courses
**Only eligible after graduation from the Basic Industrial Sewing Skill Course*

Specialized Workshops/1-Day Intensives (Ex. Apparel & Garment Construction, Shade Sails & Awnings etc.)
**Only eligible after graduation from the Basic Industrial Sewing Skill Course*

Use the space below to provide a brief description of why you are interested in our program:

How did you hear about us? _____

Email: info@azstitchlab.org

Website: azstitchlab.org