# Youth Applicant Information:

# First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Age (as of application date): \_\_\_\_\_\_\_\_\_\_\_ Date of birth: (mm/dd/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: □ M □ F

# Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt. #\_\_\_\_\_ Home Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Youth applicant Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail (youth):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.com

In case my phone number changes, I acknowledge that I **MUST** call to update SYEI database, initials: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Education Status:**

* Are you currently enrolled in school? □ Yes □ No
* If **YES**, what is the name of your school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_
* Which best describes you?

□ I am still in middle school or high school □ I graduated from High School

□ I have my HiSET certificate □ I am enrolled in a HiSET program

□ I am in College □ I am no longer in school □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Work Experience (if none, write N/A):**

* Are you currently working? □ Yes □No

Workplace: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Have you worked for the Summer Youth Employment Initiative before? □ Yes □ No

* If **YES**, what year did you work for SYEI? □ 2015 □ 2016 □ 2017

# If YES, what was your placement? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What did you learn? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

* If given the opportunity to have a summer placement again this year, would you like to work in the same job placement? □ Yes □ No
* If NO, what type of job are you interested in? \_\_\_ Office job \_\_\_ Outdoor job \_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Demographic Voluntary Information:**

|  |
| --- |
| I am Hispanic/Latino: [ ] Yes [ ] NoI am: [ ] Black/African American [ ] White |
|  [ ] Asian [ ] Native Hawaiian/Pacific Islander |
|  [ ] American Indian/Alaskan Native [ ] Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are you bi-racial or of mixed cultural/racial backgrounds? [ ] Yes [ ] No |
| **Parent's country of origin: (optional)** |
| Mother:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Father:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| Please provide the name and telephone number of two adult references that are **NOT** related to you. 1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Relationship to you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Parent /Guardian # 1** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_.com | **Parent /Guardian #2** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_.com |

Youth salaries are paid for through grant funding. Please know that a portion of Summer Program jobs are allocated to youth who work in the Chelsea Collaborative Year Round Employment Program.

After the application deadline, the Chelsea Collaborative will host a lottery. If your name gets selected in the lottery, you will be invited for an interview. The SYEI program receives different types of funding. Please fill out the information below to help us know what type of funding we could use for your job.

**The answers to these questions will NOT exclude you from program participation.**

How many family members live at home with you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

How much money does each family member earn each year? Add them together, what is the total? \_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Personal Voluntary Information:**  | **Yes** | **No** |
| Are you a child of a single parent household?  |   |   |
| Are you a parent?  |   |   |
| Are you involved in court?  |  |  |
| Are you or have you ever been a foster child through the DCF office? |   |   |
| Are you and your family currently homeless?  |  |  |
| Do you have a disability or are you on an IEP? |   |   |
| Do you have difficulty speaking, reading, or writing English?  |   |   |
| If YES please state your native language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |   |   |

**Applicants Statement, please read and sign:**

I certify that the answers given herein are true and complete to the best of my knowledge. The information on this form will be used to determine eligibility and the information is subject to external verification and may be released for such purposes.

**Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Important Note:***

*Selection is not guaranteed and is subject to funding, placements are throughout the City of Chelsea and adjacent cities. This application is for the youth to complete in its entirety. Please print clearly. Previous program participation does not guarantee continue participation.*

***For additional questions please contact the SYEI office, 617-889-6080 or syei@chelseacollab.org.***