



Summer Youth Employment Application

APPLICANTS MUST BE 14-24 YEARS OF AGE AND MEET ELIGIBILITY REQUIREMENTS TO PARTICIPATE IN THE MWC SUMMER EMPLOYMENT PROGRAM. This form must be completed and signed by the applicant. If you are less than 18 years of age, a parent, legal guardian, or responsible adult must also sign the application.

Name (Last Name, First Name)		DOB	Last Four-Digits Of Social Security # (<u> </u>) <i>(Full SSN Must Be Provided If Selected)</i>	
Current Address	Apt. #	City	State	Zip Code
Phone Number		Alternate Phone Number		Email Address
Please check the box next to the agency where you are currently receiving workforce development services or are interested in receiving services.				
<input type="checkbox"/> AZ Call-A-Teen Youth Resource	<input type="checkbox"/> Goodwill	<input type="checkbox"/> Las Artes	<input type="checkbox"/> AWEE	
<input type="checkbox"/> Chicanos Por La Causa	<input type="checkbox"/> Friendly House	<input type="checkbox"/> Jobs for Arizona Graduates		

Race (Please mark one race group below)

- | | | |
|---|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Black/African-American and White | <input type="checkbox"/> Black/African-American |
| <input type="checkbox"/> Native-Hawaiian/Pacific Islander | <input type="checkbox"/> Asian | <input type="checkbox"/> Asian and White |
| <input type="checkbox"/> Native-American/Alaskan Native | <input type="checkbox"/> Native American/Alaskan Native and Black | <input type="checkbox"/> Native American/Alaskan Native and White |
| <input type="checkbox"/> Other Multi-Racial | | |

Ethnicity - (Mark box if you are of **Hispanic or Latino** Ethnicity regardless of Race)

GENDER

- Male
 Female

EDUCATION HISTORY

Name And Location of School	Years Attended	Year Graduated	Favorite Subjects
Middle or Jr. High School			
High School			

EXTRACURRICULAR/WORK EXPERIENCE

Beg. Month/Year	Name of Org./Business	Voluntary or Paid	Position	Reason For Participating

PRE-SCREENING CRITERIA:

- | | |
|---|--|
| 1. Are you between the ages of 14-24 years of age? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Are you a U.S. Citizen? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Do you have proof of the right to work in the United States? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. If you are a male and 18 or older, did you register for Selective Service? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Are you currently receiving public assistance? TANF <input type="checkbox"/> Food Stamps <input type="checkbox"/> SSI <input type="checkbox"/> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. Do you have a high school diploma or GED? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. Are you a Veteran? Disabled Veteran? Recently Separated?
(Priority will be given to Veterans, if admission requirements are met.) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. Are you currently employed? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. Have you been laid off in the past six months and/or not currently working? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 10. Have one of your parents that you are currently living with been recently laid off and/or not currently working? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

INTEREST

What type of business would you be interested in gaining work experience? _____



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Current Education Status (Please check one box)

- In-School, H.S. or less
 In-School, Post H.S.
 Not Attending school; H.S. Dropout
 In-school, Alternative School
 Not attending school; H.S. graduate or received GED

Choose any of the following items that apply to your current situation. By checking the box, you attest the accuracy of the information in order to be eligible for the MWC Summer Youth Employment Program:

Youth Needing Assistance

- I am a youth who needs additional assistance to complete an educational program.
 I am a youth who requires assistance to secure and hold employment.

Homeless/Runaway Youth

- I am homeless or a runaway youth.

Youth with Disability

- I am a youth with a disability that can be documented in an IEP or physician's statement.

Youth Offender

- I am a youth offender.
 I have been detained and/or incarcerated.
 I am or have been on probation.

Pregnant/Parenting Youth

- I am a pregnant or parenting youth.
 I am a single parent

Foster Youth

- I am currently or have been in CPS care.
 I currently live in a group home or foster home.

Complete the section below to determine family size and income. Please include adults and youth living at the residence identified on this application. Please add the income each family member contributes to the household. Please remember the information provided may be verified by requesting additional information.

Family Member's Name	Relationship	Income Source	Dates of Employment	Hourly Wage	Hours per Week

Will you, the applicant, be claimed as a Dependent on another's income tax return?

What documentation did you, the applicant/parent/guardian/responsible adult, use to determine income eligibility?

Do you provide 50% or more of your own support?

If no income is reported, explain source of support:

CAREFULLY READ THE FOLLOWING BEFORE SIGNING YOUR NAME:

Self-Attestation Statement: I certify that the information given on this document is true and accurate to the best of my knowledge and belief. I understand that such information is subject to verification, and I further realize that falsified or fraudulent information may result in the rejection of this document, subsequent termination from the WIA Program, Summer Employment Program, or prosecution under the law.

I submit this signed form as authorization to apply for the participation in the Summer Employment Program. I understand that the completion and submission of this form does not guarantee placement in the program.

If you have any questions about the MWC Youth Employment Program or need assistance completing this form, please call 602-372-1145.

Applicant Signature: _____ **Date:** _____

Parent/Guardian/Responsible Adult Signature: _____ **Date:** _____

(Required for those under the age 18)



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ELIGIBILITY DOCUMENTATION CHECKLIST

If you are selected to participate in the program through a lottery process and eligibility determination, you must bring documentation with you to your interview appointment to complete the eligibility process. The documentation provided must be current (on the date of application and/or within three months prior to the appointment), whichever applies.

VERY IMPORTANT

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- You must bring all the documentation that applies to you to the interview appointment.
- **If you do not, the interview will not be held and will be rescheduled.**
- The application must be signed and dated by the applicant, and parent/guardian or responsible adult where applicable.
- Complete all areas. **If the application is NOT completely filled out, it will NOT be accepted.**

1. Income Verification (Last six months) - Pay Stubs, Bank Statements, Social Security Benefits (Retirement), Public Assistance Records, Alimony, Family/Business Financial Records, etc. (A family of 5 individuals living in a residence cannot make more than \$30,285 annually to be eligible for the program.)			
<i>Family Size and Income Requirements</i>			
#	Max. Income	#	Max. Income
1	\$10,400	5	\$30,285
2	\$15,142	6	\$35,422
3	\$20,790	7	\$40,559
4	\$25,665	8	\$45,696
Add \$5,137 for each additional person greater than 8			

- | |
|--|
| <p>2. If selected, bring these documents to the interview appointment:</p> <ul style="list-style-type: none"> <input type="checkbox"/> State Issued Driver's License or State ID Card <input type="checkbox"/> School ID with Picture, if in high school, vocational or post-secondary education <input type="checkbox"/> U.S. Social Security Card or Permanent Resident Card or Alien Registration Receipt Card (Form I-551) <input type="checkbox"/> Birth Certificate <input type="checkbox"/> High School Diploma/GED Certificate or High School Transcripts <p>If this information does not apply, please discuss in your initial interview appointment for further guidance.</p> |
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Applications are due to a location below by Noon on May 8, 2009 to be considered for the lottery process.

City of Avondale
 Neighborhood & Family Services Dept
 1007 S. 3rd Street
 Avondale, AZ 85323
 Attn: Chris Lopez

Glendale Community Center
 5401 W. Ocotillo Rd.
 Glendale, AZ 85301
 Attn: Danielle Medrano

Dysart Community Center
 14414 N. El Mirage Rd.
 El Mirage, AZ 85338
 Attn: Tom Campanella

YMCA/ Maryvale
 3825 N. 67th Ave.
 Phoenix, AZ 85033

YMCA/ Glendale
 14711 N. 59th Ave.
 Glendale, AZ 85301

Maricopa Workforce Connections
 1840 N. 95th Ave., Suite 160
 Phoenix, AZ 85037
 Attn: Victoria Sanchez

North Tempe Multigenerational Center
 1555 N. Bridalwreath St.
 Tempe, AZ 85281

Marcos De Niza High School
 6000 S. Lakeshore
 Tempe, AZ 85283

Tempe High School
 1730 S. Mill
 Tempe, AZ 85281

El Dorado Park Boys & Girls Club
 2311 N. Miller Road
 Scottsdale, AZ 85257

Chandler Community Action Program
 650 N. Arizona Ave.
 Chandler, AZ 85225

YMCA/ Mesa
 207 N. Mesa Dr.
 Mesa, AZ 85201

**South Mountain Community College
 Guadalupe Center**
 9233 S. Avenida del Yaqui (Priest Dr.)
 Guadalupe, AZ 85283

Maricopa Workforce Connections
 735 N. Gilbert Rd., #134
 Gilbert, AZ 85234
 Attn: Keri March

Goodwill Career Center
 930 N. Alma School Rd.
 Chandler, AZ 85224