

2009 Summer Youth Employment Interest Form

FIRST:	M.I.:	LAST:	SS#:	AGE:
STREET:		CITY:	STATE:	ZIP:
TELEPHONE #:		MESSAGE #:	EMAIL:	

School Currently Attending: _____

Highest Grade Completed: _____ Grade Point Average: _____ Expected Graduation Date: _____

Career Goals/Interests (in school and out of school):

Do any of the following describe you? If yes, mark all that apply.

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Deficient in basic literacy skills
(reading, math, or writing skills below
8 th grade level)
<input type="checkbox"/> Homeless
<input type="checkbox"/> Foster Child
<input type="checkbox"/> Offender (previous history with
the court or law enforcement)
<input type="checkbox"/> Lack significant work experience
<input type="checkbox"/> Disability | <input type="checkbox"/> School drop-out
<input type="checkbox"/> Runaway
<input type="checkbox"/> Pregnant or Parent
<input type="checkbox"/> Behind at least one grade
level
<input type="checkbox"/> Family receives TANF,
OWF, PRC, Food Assistance, or
Medicaid |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

My estimated **Gross Monthly Family Income** from employment during the past six (6) months was (excluding child support, unemployment compensation and/or cash public assistance): \$ _____

Please continue to the next page.

I understand that:

Completion of this form **does not** create entitlement to services authorized under the Workforce Investment Act.

Carroll County Connections does not unfairly exclude anyone from opportunities or make decisions based upon race, color, religion, origin, political affiliation, age or disability.

I will be required to provide the following documentation prior to being enrolled in any youth program through the Workforce Investment Act, including, but not limited to: birth certificate, social security card, proof of family income, proof of residency.

If I am accepted into the 2009 Summer Youth Employment Program, I will be expected to be at work as scheduled. Any missed work will be reported to both the Program Supervisor and the Worksite Supervisor prior to the beginning of the scheduled shift.

I certify that the information that I have provided on this document is true and correct to the best of my knowledge.

Signature of Applicant

Date Completed

Signature of Parent/Guardian

Date Completed

Completed interest form should be returned to:

**Carroll County Connections
P.O. Box 219
Carrollton, OH 44615**