



Young Adult Employment and Training Program Application

Full Name: _____
Last First MI

Home Address: _____
Street Address Apt. #

City/Town: _____ **Zip Code:** _____

Cell Phone # (yours): _____

iCloud Message #/Email (yours): _____

Email Address: _____

Gender (assigned at birth): Female Male **Current Age:** _____

Have you worked for the Career Center before? Yes No

Ethnicity: (Choose One)

Hispanic or Latino Not Hispanic or Latino

Race:

White Other Pacific Islander Asian Other _____
 Black or African American American Indian Alaskan Native Native Hawaiian

SCHOOL STATUS:

Name of the school you are presently attending and grade:	
Name: _____	Grade: _____
<input type="checkbox"/> Not in School <input type="checkbox"/> Graduated <input type="checkbox"/> Other _____	

Check off the program that fits your age and interest.

<input type="checkbox"/> 14-15 Year Old Traditional Work Experience Program up to 130 hours of work
<input type="checkbox"/> 14-15 Year Old Service Learning Program up to 60 hours of programming
<input type="checkbox"/> 16-24 Year Old Traditional Work Experience Program- 6 to 7 weeks of paid hourly work
<input type="checkbox"/> 18-25 Year Old Traditional Work Experience Program with asynchronous training
<input type="checkbox"/> 18-25 Year Old Peer Leader Program- 6-7 weeks of work as a Junior Counselor

FAMILY MEMBERS: (Include **yourself** and all family members who **presently live** with you and are related to you by blood, marriage or decree of court and can be included in one or more of the following categories):

- A. Husband, Wife and Dependent children
- B. A Parent or Guardian and Dependent Children
- C. Brothers and/or Sisters

	Name	Age	Relationship to Applicant
1	Applicant		Self
2			
3			
4			
5			
6			

APPLICANT/PARENT/GUARDIAN CERTIFICATION: I attest that the information on the application is true to the best of my knowledge and that there is no intent to commit fraud. The information on the application will be used to determine eligibility and the information is subject to external verification and may be released for such purposes. I am also aware that I am subject to immediate termination if I am found ineligible after enrollment and may also be subject to criminal prosecution if falsified documentation was provided.

Applicant's Signature	Date	Parent/Guardian Signature (if applicant is under 18)
CC of Lowell Staff Signature	Date	I authorize _____ (Name of School) to release pertinent information to the CCL

In Case of Emergency (list numbers other than your home number). MUST LIST TWO.

1) Name: _____ Relationship: _____ Telephone # _____

2) Name: _____ Relationship: _____ Telephone # _____

PERMISSION TO PHOTOGRAPH/EMERGENCY RELEASE

By signing below I grant permission to the Career Center of Lowell/GLWDB to publish the name, photograph and/or information about myself/ daughter's/son's program participation. I also grant permission to perform emergency treatment to myself/daughter/son in case of accident or injury on the job.

Signature of Parent/Guardian (If Under 18)/ Signature of Young Adult (If over 18)

Do you have a Disability? Yes No

If **yes**, please provide the first and last page of IEP or 504 Plan from school (if applicable) and fill out the Self Attestation form.

Tell us about yourself

Applicant Information

Name: _____ Age: _____ Zip Code: _____

Employment Information

Have you worked through the Career Center in the past? Yes No If yes, where? _____

Have you worked or volunteered? Yes No If yes, where? _____

Skills & Interests

What skills and interests do you have? (Sports, Art, Music, Debating, Etc.) _____

What type of job would you like to do? (Working with kids, outside, in an office, etc.) _____

Are you in a shop or special program in school? If yes, which one? _____

Are you interested in Food Systems, Urban Agriculture and Food Justice with Mill City Grows' Food Justice Squad? *Must be able to lift 25+ pounds and work outdoors in varying conditions. Yes No

Transportation & Location

How will you get to a job? Walk Bus Get a ride Bike Other: _____

What areas can you get to for work (if you cannot get to these areas do not check them off):

- Acre Belvidere Centralville Downtown
 Highlands Pawtucketville South Lowell Other: _____

Shirts

What size shirt would you need? Small Medium Large XLarge XXLLarge