



# Young Adult Employment and Training Program Application

**Full Name:** \_\_\_\_\_  
Last First MI

**Home Address:** \_\_\_\_\_  
Street Address Apt. #

**City/Town:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Cell Phone # (yours):** \_\_\_\_\_

**Email Address/Icloud:** \_\_\_\_\_

**Gender (assigned at birth):**  Female  Male **Gender Identified Currently (If different):** \_\_\_\_\_

**Current Age:** \_\_\_\_\_

**Have you worked for the Career Center before?**  Yes  No

If yes, where: \_\_\_\_\_

## Ethnicity: (Must Choose One)

Hispanic or Latino  Not Hispanic or Latino

## Race (Choose all that apply, Minimum 1):

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:** \_\_\_\_\_

Not in School  Graduated  Other \_\_\_\_\_

## Check off the program that fits your age and interest.

**14-15 Year Old** Service Learning Program up to 60 hours of programming

**16-21 Year Old** Traditional Work Experience Program- up to 6 weeks of paid hourly work

**18-21 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	<b>Applicant</b>		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	<b>Parent/Guardian Signature (if applicant is under 18)</b>
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 Water Systems, effects of pollution, laboratory work, weekly field trips and more \*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  XXLarge