

**2020 CT SUMMER YOUTH EMPLOYMENT PROGRAM  
APPLICATION INSTRUCTIONS**

**SIGNATURE PAGE**

**Registrant Attestation and Release**

I certify that the statements made by me on this application are voluntary, true, complete and correct to the best of my knowledge and belief, and are made in good faith. I understand that the information I have provided is subject to review and verification. If I knowingly make any misstatements of facts, I am subject to disqualification or dismissal and to such other penalties as may be prescribed by law, Federal or State regulations. I understand and authorize the release of the information to the Workforce Alliance's Summer Youth Employment and Training Program, the authorized entity and partner agencies for regulatory and internal processes associated with determining employment eligibility and payroll procedures.

**Code of Conduct Statement**

If selected to the program, I understand and agree to adhere to the rules of the program and conduct myself responsibly and respectfully at all times. While at my worksite, I agree to: **1.)** Report to work on time; **2.)** Refrain from the use of profanity or foul language; **3.)** Refrain from any aggressive or violent behavior, threats of violence, weapon possession or sexual harassment; **4.)** Wear appropriate clothing (*i.e., no excessive jewelry, revealing clothing, do-rags/ bandanas and/or any other clothing deemed unacceptable by my worksite supervisor*); **5.)** Refrain from the use, purchase or possession of any drugs or alcohol; **6.)** Refrain from theft or possession of any stolen property; **7.)** Refrain from any discriminatory behavior towards another individual based on race/ethnicity, economics, disability, religion or sexual preference.

**Civil Rights Law**

This information is requested solely for the purpose of determining compliance with Federal civil rights law and your response will not affect consideration of your Registration. By providing this information, you will assist in assuring that this program is administered in a non-discriminatory manner. This program or activity is an equal opportunity employer/program and auxiliary aids and services are available upon request.

\_\_\_\_\_  
Student (Registrant) Signature - Date

\_\_\_\_\_  
Parent/Guardian Signature - Date

Name of Applicant \_\_\_\_\_

**Dear Youth, Parents and Legal Guardians:**

Please read the entire application carefully before submitting. The 2020 CT Summer Youth Employment Program is intended to provide early work experiences for young people ages 14-21 that may not otherwise have this opportunity. There are limited opportunities available in the summer program. Please note that completing this application does not guarantee a placement

**THIS APPLICATION MUST BE SIGNED BY APPLICANT AND A PARENT IF YOU ARE UNDER THE AGE OF 18.**

Please print clearly in ink. Answer each question carefully and **do not leave any blank spaces** as incomplete applications will not be accepted.

**You will need to provide the following information with this application:**

- 1) Copy of Birth Certificate, or other proof of age**
- 2) Copy of Social Security Card** - If you do not have a Social Security card, you must bring your birth certificate plus proof of identity to the local Social Security Administration Office and apply for a card. This process can take upwards of two weeks to complete. Please plan accordingly.
- 3) Documentation of all income in your household (anyone that lives with you in the household)**
  - A. **Public Assistance** ~ a copy of the most recent budget sheet or letter verifying benefits received from the Department of Social Services
  - B. **Unemployment Compensation**~ a copy of the Unemployment Compensation Benefits grant letter (not form UC-58AB)
  - C. **Social Security** ~ a copy of the most recent SSD or SSI grant letter or monthly check
  - D. **Employment**~ copy of the last four (4) paystubs for you or any family member employed within the last six (6) months.
- 4) Documentation of a disability (if applicable)**
- 5) If you are a male 18 or older proof that you have registered for Selective Service (If applicant is required to register go to [sss.gov](http://sss.gov) and do so. Print confirmation).**
- 6) Family Information section (p. 3—household composition) must be completed entirely.**

