



Take the first step to getting a great summer job!

The City of Rochester's **Summer of Opportunity** and **RochesterWorks Summer Employment** programs are joining forces to provide summer jobs to youth between the ages of 14-20. **Hurry and apply, there are a limited number of jobs! Application deadline is April 9, 2009.**

EMPLOYMENT APPLICATION

Who's Eligible?

Youth who live within the City of Rochester and Monroe County, currently enrolled in middle and high school.

Application Process:

Step 1: fill out this application.

Step 2: students attend a 2-hour job readiness training session and a pre-screen interview to be eligible for a summer job.

Step 3: parents attend a mandatory 1-hour parent orientation.

Please note: jobs are limited, and not every student that applies or is eligible will be hired, so continue to look for other employment opportunities in the community.

When & Where to Apply:

Students can submit applications in person beginning February 23 – April 9, 2009, at the following locations:

City of Rochester

Bureau of Youth Services
City Hall, 30 Church Street, Room 222B
Rochester, NY 14614
(585) 428-6366

RochesterWorks! Career Center

255 N. Goodman Street
Rochester, NY 14607
(585) 258-3500

Rochester City School District students can submit completed applications in high schools. Please check with the Main Office for the contact person in your school.

Faxed copies or applications without original signatures will **NOT** be accepted.

PERSONAL INFORMATION (print in ink)

NAME _____
LAST FIRST MIDDLE

DEMOGRAPHIC INFORMATION (PLEASE CHECK THE APPROPRIATE DESCRIPTION) **SEX:** ___ M ___ F
ARE YOU HISPANIC? ___ YES ___ NO ARE YOU A U.S. CITIZEN? ___ YES ___ NO IF NO, INDICATE STATUS _____
ETHNIC GROUP: ___ CAUCASIAN (WHITE) ___ BLACK OR AFRICAN AMERICAN ___ ASIAN ___ OTHER
___ NATIVE HAWAIIAN/PACIFIC ISLANDER ___ NATIVE AMERICAN OR ALASKAN NATIVE

ADDRESS _____
HOUSE # STREET CITY STATE ZIP

TELEPHONE # () _____ **MSG#** () _____ **LAST 4 DIGITS OF SS #** _____

DATE OF BIRTH _____ **AGE:** _____ **EMAIL ADDRESS:** _____
MONTH DAY YEAR

EDUCATION

SCHOOL YOU CURRENTLY ATTEND _____

GRADE YOU ARE IN? _____ ATTACH A COPY OF MOST RECENT REPORT CARD. APPLICATION **WILL NOT BE**
ACCEPTED WITHOUT A REPORT CARD

LICENSES/ PERMITS/ CERTIFICATIONS

DO YOU HAVE A...

***PLEASE ATTACH COPIES OF THESE CERTIFICATIONS**

WORK PERMIT (REQUIRED IF UNDER 18 YEARS OLD) YES NO EXP. DATE _____

DRIVERS LICENSE YES NO EXP. DATE _____

*LIFEGUARD CERTIFICATION YES NO EXP. DATE _____

WORK HISTORY OR VOLUNTEER EXPERIENCE

PLACE OF EMPLOYMENT _____ SUPERVISOR _____

ADDRESS _____

JOB TITLE _____ DATES: FROM _____ TO _____

DUTIES _____

VOLUNTEER PAID **ATTACH A RESUME IF YOU HAVE ONE**

DID YOU WORK LAST SUMMER FOR **SUMMER OF OPPORTUNITY** OR **ROCHESTERWORKS**? YES NO

IF YES, WHERE? _____

INTERESTS/ SKILLS/ ABILITIES

LIST ANY SPECIAL SKILLS OR SPECIAL INTERESTS: _____

LIST ANY CLUBS, SPORTS OR ACTIVITIES IN WHICH YOU ARE INVOLVED: _____

LIST ANY CERTIFICATES AND AWARDS YOU HAVE RECEIVED IN THE PAST **TWO** YEARS: _____

DO YOU HAVE BASIC COMPUTER SKILLS? YES NO DO YOU HAVE PHYSICAL OR OTHER RESTRICTIONS? YES NO
(ie: Learning disability, can't lift, color-blind, etc.) If yes, describe:

WHY SHOULD I BE SELECTED FOR THIS PROGRAM? _____

JOB CATEGORIES

PLEASE REVIEW THE JOB CATEGORIES BELOW, AND RANK YOUR TOP 3 CHOICES FOR A SUMMER JOB ON THE SPACES PROVIDED. EVERY EFFORT WILL BE MADE TO MATCH YOU TO ONE OF THE CHOICES YOU SELECTED, BUT JOB PLACEMENT IS NOT GUARANTEED.

_____ RECREATION/LIFE GUARD/DAY CAMP

_____ OFFICE/CLERICAL/CUSTOMER SERVICE

_____ FOOD SERVICE/RESTAURANT/CASHIER

_____ MAINTENANCE/GROUNDS-KEEPING/GENERAL LABOR

_____ COMPUTERS/TECHNICAL INTERNSHIPS

_____ FACTORY /WAREHOUSE

SIGNATURES

STUDENT:

I have answered truthfully. If I have given any false information, I understand that I may be terminated from the program.

Student Signature

Date

PARENT/GUARDIAN:

*I give permission for my child to participate in the **Summer of Opportunity** or **RochesterWorks Summer Employment Program**, and for the program to contact my child's school to obtain additional information, and/or to conduct a background check, if necessary. Additionally, I agree to allow for the recorded image or voice of my child to be used for promotional materials, and understand that neither I, nor my child will be compensated for them.*

I agree to attend the mandatory one-hour parent orientation session.

Parent / Guardian Signature

Date

SCHOOL ADMINISTRATOR:

This student has at least 90% attendance Y _____ N _____ *long-term suspensions this school year* Y _____ N _____

Name / Signature

Title

Phone Number

Date

TURN OVER FOR ADDITIONAL QUESTIONS

FAMILY INFORMATION

CONFIDENTIAL INFORMATION—WILL NOT BE SHARED OUTSIDE OF THE PROGRAM.

1. PLEASE CHECK ALL THAT APPLY - ARE YOU OR YOUR FAMILY RECEIVING:

- PUBLIC ASSISTANCE/TANF IF YES, PA CASE # _____
- FOOD STAMPS IF YES, FS CASE # _____
- HEAP (HOME ENERGY ASSISTANCE PROGRAM) IF YES, CASE # _____
- FREE OR REDUCED LUNCH IN SCHOOL
- ARE YOU A YOUTH IN FOSTER CARE?
- DO YOU HAVE AN INDIVIDUAL EDUCATION PLAN (IEP)

2. NUMBER OF PEOPLE IN YOUR FAMILY (HOUSEHOLD) _____

3. ESTIMATED ANNUAL HOUSEHOLD INCOME: _____

4. HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO

IF YES, EXPLAIN: _____

5. HAVE YOU REGISTERED FOR SELECTIVE SERVICE (for males aged 18+) YES NO NA

APPLICATION CHECKLIST

- APPLICATION IS COMPLETE AND FILLED OUT IN INK
- APPLICATION IS SIGNED BY: YOU PARENT OR GUARDIAN SCHOOL ADMINISTRATOR
- A COPY OF THE MOST RECENT REPORT CARD IS ATTACHED

THINGS YOU SHOULD KNOW AFTER TURNING IN YOUR APPLICATION

- After you turn in your application, you will get a receipt with the date of your job readiness training that you have been scheduled for. You must attend this job readiness training and receive an interview with program staff before being referred to jobs.
- You **must be dressed for an interview** for all appointments and interactions with the program or job interview sites.
- Your parent/guardian must attend a mandatory one-hour parent orientation.
- If you move or your telephone number changes, it is your responsibility to let the program office know!
- If you have questions, call us at one of our two program locations noted below.

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RochesterWorks! Career Center
255 N. Goodman St.
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OFFICE USE ONLY

Attendance _____ %

GPA _____

Income Eligible Y N

City Resident Y N

Staff Initials _____

Date Received: _____