

152 West High Street Ballston Spa, NY 12020 Phone: (518) 884-4170 | Fax (518) 884-4262 Director - Jenniffer McCloskey Youth Counselor – Kassandra Purcell

Summer Youth Employment Program

Eligibility Requirements

- Income based work experience program for Saratoga County youth residents 14-20 years old.
 - Youth may qualify if they or their family receives: Medicaid, Supplemental Security Income, SNAP, Cash Public Assistance, HEAP.
- If you are under 18 you must apply for your working papers now. Contact your school guidance office (14 & 15 have a blue work card – 16 & 17 have a green work card).

About the Program

- Summer employment is for approximately 8 weeks June 26th – August 31st 2023.
- Hiring rate is \$15.00/hour
- Work up to 30 hours/week
- Job matching considerations include: skills, interests, transportation, and desired location.
- Types of jobs include: clerical/office assistant, laborer, customer service, grounds work, library page, cleaner and more.

NOTE: Funding for the Program is always contingent on legislative action and budget inclusion. Any incentive programs will be subject to the availability of funds. Additionally, if deemed eligible for the program, youth will be required to provide ID documents (birth certificate, social security card, NYS ID/permit/license, etc.).

How to Apply

- Please return the attached application to the address indicated.
- You MUST fill out ALL sections of the application form to be considered.
- Be sure to write neatly, especially phone numbers.
- Ensure voicemail is set up and able to receive messages.

Deadlines

- Applications must be received by April 21, 2023.
- We will begin contacting eligible candidates in May to continue the application process.

Any questions, contact Kassandra Purcell kmpurcell@saratogacountyny.gov
518-884-4904 direct office
518-941-4614 cell



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Summer Youth Employment Program Application

You MUST fill out ALL sections of the application form to be considered.

Youth Information

Full Legal Name	Birthdate			
	Social Security Number			
	Preferred Pronouns			
Ethnicity, <i>check all that apply</i> □White □Black □ Hispanic □Asian □Native Ame	erican □Pacific Islander □Other □Prefer to not answer			
If you are a male, 18 years old or older, have yo	ou registered with selective service?□No □Yes			
	City Zip code			
Do you live in a town different from mailing address? □No □Yes				
Youth CellYouth Email				
Preferred contact □Call □Text □Email				
Where did you obtain this application?				
Parent Information				
Parent/Guardian Name	Cell			
Eligibility				
Eligibility				
Do you or members of the household receive any supportive services through the county? □No □Yes				
Check ALL that apply □SNAP □HEAP □Medicaid □M	aid Waiver □SSI □TANF □Family Assistance/Safety Net □Foster			
Parent/Guardian, complete only if you do	n't receive supportive services from Saratoga County.			
List all immediate family members of your househole	d, including youth, and their gross income (income before taxes & deductions).			

IMMEDIATE FAMILY MEMBERS CLARIFICATION:

Family members include your mother, father, stepmother, stepfather, any brothers or sisters (including half-siblings) who are under 18 years of age (or 18 and in secondary school) and these siblings' parents. If you have a child of your own, you should include that child, any brothers or sisters of the child, and the child's parent. You should not include any of these people if they do not live with you. You should not include other family members such as grandparents, uncles or aunts. If you are married, you should include your spouse, but do not need to include your parents or siblings.

TYPES OF INCOME

Wages, social security benefits, public assistance benefits, child support, alimony, etc.

Any questions regarding income, please contact the Career Center 518-884-4170.

Availability Do you have a valid Employment Certificate (green/blue work card)? ☐No ☐Yes Will you have reliable transportation? ☐No ☐Yes Do you have any known summer commitments? □No □Yes, what and when Possibility of Summer School? ☐No ☐Yes Mark days of the week you are available to work: □Monday □Tuesday □Wednesday □Thursday □Friday □Saturday □Sunday Earliest arrival time Latest Departure time ___ **Youth Interests** What kind of jobs would you be interested in? (Check all that apply) \(\sigma\)Clerical/Office \(\sigma\) Laborer \(\sigma\) With youth □Cleaning □ Library □Museum □Indoors □Outdoors □With animals □Other ____ Select any skills/experiences you wish to gain this summer. **Financial** ☐ Learn to manage money/budget ☐ How to buy a car ☐ How to open a bank account ☐ All about credit □Student Loans □Financing College Soft Skills □Time Management □Communication □Resolving workplace conflict □Networking □Teamwork □Listening □Creative thinking □Work Ethic Occupational Skills □Coding □Clerical work (paperwork, answering phones □Landscaping □Maintenance □Computer Skills □Food preparation □Retail □Food Service **Education** Are you currently enrolled in school? □No, last grade completed ______

Are you enrolled at BOCES? □No □Yes, Program Name

□Yes, Name of School Current Grade _____

Do you have an IEP? ☐ No ☐ Yes

Employment History

Have you ever been in the Summer Youth Program?				
□No □Yes, When	Worksite Name	Worksite Name		
Have you ever worked/volunte	eered before? □No, skip to	next page □Yes, co	omplete work history below	
Employer		Start Date		
Address		End Date		
Job Title		Wage	🗖 Hour 🗖 Week 🗖 Month 🖫 Year	
Reason for Leaving				
Job Responsibilities				
Employer				
Address		End Date		
Job Title		Wage	□ Hour □ Week □ Month □Year	
Reason for Leaving				
Job Responsibilities				
Employer		Start Date		
Address				
Job Title		Wage	□ Hour □ Week □ Month □Year	
Reason for Leaving				
Job Responsibilities				

Certification

submitting an application in no way guarantees an interview or placement in a summer job.				
Applicant's Signature	 Date			
Families (TANF) and/or the State of New York. I will eligibility determination. I grant permission to Sarato release and obtain information regarding physical a	oga County Department of Employment & Training to nd/or mental disabilities and other pertinent information ol and other appropriate agencies. This information will briate services to be provided. I understand that all eged.			
Print Name				
Parent/Guardian Signature (Required if applicant is under age 18 or lives at home)	Date			

Application Priority Deadline is April 21, 2023 PLEASE RETURN THIS APPLICATION BY MAIL OR E-MAIL TO:

kmpurcell@saratogacountyny.gov

Saratoga County Career Center
152 West High Street, Ballston Spa, NY 12020

Questions? Please call or text Kassie at (518) 941-4614. Calls and text will be returned Monday – Friday 9 am – 4 pm