

**HERKIMER COUNTY**  
**EMPLOYMENT & TRAINING**  
**ADMINISTRATION**

**Working Solutions Career Center**  
**320 N. Prospect St., Herkimer, NY 13350**  
**315-867-1400**

**APPLICATION PACKET**  
**For the**  
**2019**  
**SUMMER YOUTH EMPLOYMENT PROGRAM**



*“We are an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.”*

## ***APPLICATION INSTRUCTIONS and INFORMATION***

### **2019 Summer Youth Employment Program**

**Operated by the Herkimer County  
Employment & Training Administration**

#### **IMPORTANT TO NOTE:**

- **No one is guaranteed a summer job through this program.**
- **To be considered for the SYEP, please follow the application process below:**

**Step 1:** Youth must fully complete the Job Seeker Youth Registration Form (attached) – include signatures.

**Step 2:** Youth and Family must fully complete the TANF Youth Services Application form (attached) – include signatures.

**Step 3:** Submit the Job Seeker Youth Registration Form AND the TANF Youth Services Application to the Herkimer Working Solutions Office at 320 North Prospect St. in Herkimer.

**Please submit forms no later than *Friday, MAY 24, 2019***

The following is a summary of the Summer Youth Employment Program:

The purpose of this program is to provide wage subsidy (\$11.10/hour) paid summer employment to eligible participants between the ages of 14 – 20, along with providing a good start in learning how to become a self-sufficient member of society. The number of work hours per week would be part time, probably 16-20 hours per week.

Our program will again be broken up into two components. Youth, ages 14 & 15, are eligible to apply for a more comprehensive, targeted program to be held at the Herkimer County BOCES complex. Please see the attached flyer for more information on this innovative initiative. Youth, ages 16-20, can apply to work at individual worksites across the county in public and non-profit agencies/organizations. All youth are paid through the county and monitored on a regular basis by the ETA staff. The staff visit youth at their worksites and teach them employability skills needed to become successful in the world of work.

This program is evaluated on an ongoing basis throughout the summer to ensure a safe, productive, and meaningful work experience.

If you have any questions regarding the Summer Youth Employment Program, please contact **Mike Werenczak**, ETA Youth Services Coordinator at **(315) 867-1400**.



## Job Seeker Youth Registration Form

1. LastName \_\_\_\_\_ FirstName \_\_\_\_\_ M.I. \_\_\_\_\_
2. Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
3. Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
4. Ethnic Background \_\_\_\_\_ (White, Black/African American, Hispanic/Latino, Alaskan/American Indian, Asian, Hawaiian/Pacific Islander)
5. Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female
6. Are you a US Citizen? \_\_\_\_\_ yes \_\_\_\_\_ no
7. Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age \_\_\_\_\_
8. Education: Are you currently in school? \_\_\_\_\_ yes \_\_\_\_\_ no
  - a. If so, current grade level/School Name \_\_\_\_\_ / \_\_\_\_\_
  - b. Will you be attending Summer School? \_\_\_\_\_ yes \_\_\_\_\_ no

If not in school, highest grade completed \_\_\_\_\_  
Diploma/Degree \_\_\_\_\_
9. Are you employed? \_\_\_\_\_ yes \_\_\_\_\_ no If yes, where? \_\_\_\_\_
10. What type of work are you interested in? \_\_\_\_\_
  - a. How far can you commute? \_\_\_\_\_ 5 \_\_\_\_\_ 10 \_\_\_\_\_ 25 \_\_\_\_\_ 50 miles
  - b. Do you have a working card (if under 18)? \_\_\_\_\_ yes \_\_\_\_\_ no
11. Have you been convicted of a crime? \_\_\_\_\_ yes \_\_\_\_\_ no
12. Are you a person with a disability? \_\_\_\_\_ yes \_\_\_\_\_ no
13. Are you currently in Foster Care? \_\_\_\_\_ yes \_\_\_\_\_ no
14. Are you currently working with the PINS or Probation Dept? \_\_\_\_\_ yes \_\_\_\_\_ no
15. Do you give your permission to have any photos taken during the SYEP used for publicity purposes? \_\_\_\_\_ yes \_\_\_\_\_ no

Applicant Signature/Date: \_\_\_\_\_ / \_\_\_\_\_  
Parent/Guardian Signature (if under 18): \_\_\_\_\_

## TANF Eligibility Guidelines -2019

The following is the Income of Family Members criteria that determine eligibility for the TANF Summer Youth Employment Program. If the youth applicant receives any of the following benefits or meets the 2018 family income levels, they may qualify for TANF Youth Services:

1. Family Assistance/Safety Net
2. Medicaid
3. Food Stamps(SNAP)
4. HEAP
5. SSI
6. 200% of Poverty Income levels – gross income of household family members.

**\*Please note: Receipt of free or reduced lunch is NO LONGER an eligibility criteria item**

### 200% of Poverty Income Guidelines for 2018

<u>Family Size</u>	<u>Annual Income</u>	<u>Monthly Income</u>	<u>Bi-Weekly Income</u>	<u>Weekly Income</u>
1	\$24,280	\$2,023	\$ 931	\$ 466
2	32,920	2,743	1,263	631
3	41,560	3,463	1,594	797
4	50,200	4,183	1,925	963
5	58,840	4,903	2,257	1,128
6	67,480	5,623	2,588	1,294
7	76,120	6,343	2,920	1,460
8	84,760	7,063	3,251	1,626
<b>For each additional family member, add the following:</b>				
	\$ 8,640	\$ 720	\$ 331	\$ 166

# **2019 SUMMER YOUTH EMPLOYMENT PROGRAM** **SPECIFICS**

## **14 & 15 year old component**

This year we hope to be contracting once again with Herkimer County BOCES to offer a six (6) week (20 hours per week) program based in career exploration and work readiness. Youth will be able to explore different career clusters by receiving information and instruction related to that particular career area, they will develop their listening and speaking skills through mock interviews and presentations and they will receive financial literacy and money management skills. The other part of the day will be devoted to a work project. More details will be available regarding this component in the near future.

This program is limited to 30 students who are not selected on a first come-first serve basis, but instead, selection is based on a number of factors.

## **16-20 year old component**

Eligible youth ages 16-20 will be placed in various worksites throughout the county. They will work 16 hours per week which will include periodic visits from ETA staff who will provide instruction in the area of work readiness. Youth will develop a resume that will be uploaded onto a flash drive that can be used to assist them in obtaining future employment.

We anticipate that there will be funding available for approximately 30 youth in this component as well. Selection process will remain the same as described above.

***PLEASE BE AWARE THAT ONCE THEY ARE SELECTED, ALL YOUTH WILL NEED TO PRODUCE ACCEPTABLE DOCUMENTATION FOR IDENTITY. IN ADDITION, THOSE AGES 14-17 MUST HAVE A VALID WORKING CARD WHICH CAN BE OBTAINED AT YOUR SCHOOL GUIDANCE OFFICE. THOSE 18 AND ABOVE MUST HAVE PHOTO I.D. AND PROOF OF A CURRENT PHYSICAL (WITHIN THE LAST YEAR).***

## TANF YOUTH SERVICES APPLICATION

The information requested on this form is necessary to determine whether or not federal Temporary Assistance for Needy Families (TANF) funds may be used to provide services to you. This application form may be used by an applicant for services who is under 21 years of age.

### SECTION ONE

#### A. Information About the Youth Applicant

1. Applicant's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

(Street) (Apartment Number)

\_\_\_\_\_ (City) (State) (Zip Code)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

(Month, Day, Year)

Telephone Number: \_\_\_\_\_

### SECTION TWO Citizen / Non-Citizen Status

A. Are you a United States citizen?

Yes. If yes, go to Section Three.

No. If no, complete Item B.

B. If you (the youth applicant) are not a United States citizen, look at the "Immigration Status List" on pages 5 and 6 and tell us which status applies to you. Enter the status number from the list and complete the information below.

Immigration status (# 1 through 15) that applies: \_\_\_\_\_

INS Form Number: \_\_\_\_\_

Alien Number: \_\_\_\_\_

Date of Entry into United States: \_\_\_\_\_

### SECTION THREE Income of Family Members

A. Do you (the youth applicant) currently receive benefits under one or more of these programs?

Yes, check which program(s) and then go to Section Four.

FAMILY ASSISTANCE/ SAFETY NET	MEDICAID	SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)	HEAP	SSI

No, complete Item B, on page 2.

**B. If you do not currently receive one of the programs listed above, please tell us about any income of your family members.**

Include the gross income (income before taxes and deductions) of each family member who lives with you. 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.

List all sources of gross income, including wages, social security benefits, public assistance benefits, child support, alimony, etc. received and any other recurring income of a family member. You do not need to include any earned income (wages) received by you or any other family member who is under 18 years of age (or 18 and in secondary school) but must include any unearned income.

	NAME	INCOME SOURCE: WAGES, SOCIAL SECURITY, etc.	AMOUNT	RECEIVED (Check One)		
				Yearly	Monthly	Weekly
1.						
2.						
3.						
4.						
5.						
6.						

**SECTION FOUR Applicant Notification and Signature**

The individual signing this application may be asked to prove any or all of your statements. If we ask you to do this, we will tell you how to prove your statements.

We are asking for Social Security number(s) because any person applying for or receiving federal TANF services must give us his or her Social Security number; Social Security numbers are required under federal law (Section 409(a)(4) of the Social Security Act) and federal regulations (45 CFR 264.10). We may use Social Security number(s) to do computer matches with other programs to prove you are receiving these programs (for example, SNAP), to do a computer match to verify other information on the application, or to verify your alien status.

If you disagree with any decisions we make regarding your eligibility to receive TANF services, you may have your certification reviewed by a person at a level above the person who made the first decision.

**By signing this, I am swearing, under penalty of perjury, that all of the above statements are true to the best of my knowledge and that I am willing to cooperate with any efforts to verify the information provided.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

**If the applicant lives with his or her parents, a parent or other adult relative caretaker must sign this form for the application to be complete. The Commissioner of the Department of Social Services or his or her designee must sign for children in foster care.**