



NOLA Youth Works 2014: Activity Card

FOR OFFICE USE ONLY

NORDC Teen Camp__ JCC __ WL__ Signature__ Traditional __ Intern NOLA__
 Drug Test __ Background Check __

Applicant s Information

LAST NAME: FIRST NAME: MI:

DATE OF BIRTH: (month/day/year)

ADDRESS:

AGE: GRADE: PLEASE INDICATE YOUR T-Shirt SIZE: SM M L XL XXL

Disclaimer: Program sites and worksites are assigned based on employer's requirements and availability. Consequently, **YOU MAY NOT** be assigned to your **FIRST CHOICE**. In that case your placement will be based on program/job availability. We are **UNABLE** to accommodate **ANY TRANSFERS**. Transportation will **NOT** be provided to worksites.

AGE	OPPORTUNITIES	DESCRIPTION	DURATION	STIPEND/ RATE OF PAY (Excluding Holidays)
13-15	NORDC Teen Camp	Career exploration program and leisure sports such as golf and tennis. Weekly field trips, breakfast, and lunch provided.	6 weeks	\$75/ week (30 hours per a week)
15	Work and Learn	Grade-level based instruction, career exploration/ job-readiness, and project-based learning. <i>(Health Education Program includes participation in BART Becoming a Responsible Teen & Healthy Living)</i>	5 weeks	\$100/ week (20 hours per a week)
15-16	Signature Program	Programs will focus on niche industries (e.g. film or architecture). Participants will be immersed in learning through projects, community service, presentations, and field trips. <i>(Health Education Program includes participation in BART Becoming a Responsible Teen & Healthy Living)</i>	5 weeks	\$100/ week (20 hours per a week)
16	Athletics and College	Projects focus on summer athletics training, NCCA clearinghouse certification, education and ACT/SAT preparation.	5 weeks	\$100/ week (20 hours per a week)
16-21	Traditional**	Youth will be engaged in a youth-friendly environment and receive hands-on work experience that is reflective of the job-site placement. **Background check is mandatory	5 weeks	\$8/ hour (20 hours per a week)
17-21	Junior Camp Counselor*	Youth will serve as camp counselors at various Camp sites throughout the metro area. CPR and/or First Aid training and will be provided. Interviews are required. * Background checks and drug tests are mandatory	5 weeks	\$8 hour (30 hours per a week)
18-21	Intern NOLA*	Youth will be expected to perform at a high level and complete projects for a select group of local employers. Placements are based on availability in youth's profession in a college program. Resumes and interviews required. Selection is competitive. (Business attire required for interview) *Background check is mandatory	6 weeks	\$10/hour (25-30 hours per a week)

Information provided may be used by the City of New Orleans to improve city services, or to access additional funding. Keep in mind **SUBMISSION OF AN APPLICATION DOES NOT GUARANTEE ELIGIBILITY OR ENROLLMENT INTO THE PROGRAM**

Activity Card Age 17

Please SELECT your preference of program, 1-3 (1 being the most preferred), and check 3 areas of interest.

PROGRAM CHOICES

_____ **Traditional***

_____ Worksite Interest

_____ Agriculture
_____ Architecture
_____ Business
_____ Construction
_____ Cosmetology
_____ Criminal Justice

_____ Engineering
_____ Health Care
_____ Horticulture
_____ Information Technology
_____ Retail
_____ Theater/Film

_____ **Junior Camp Counselor***

Please list the zip code that is most convenient for you.

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NOLA YOUTH WORKS
 SUMMER EMPLOYMENT PROGRAM
 MAYOR MITCHELL J. LANDRIEU

2014 Subsidized Summer Youth Employment Program Application

NOLA Youth Works Summer Employment transforms communities by cultivating responsible youth who are career ready. Through meaningful summer experiences, NOLA Youth Works help youth define and advance their career goals and transform their communities. For participant consideration, applications must be fully completed and all original documentation submitted at the time of your appointment.

Applicant Information											
LAST NAME:				FIRST NAME:				MI:			
DATE OF BIRTH: (Month/Day/Year)											
Social Security Number:					-						
ADDRESS:						EMAIL:					
CITY:				STATE:				ZIP CODE:			
TELEPHONE NUMBER:						ALTERNATE NUMBER:					
RACE:				GENDER: M <input type="checkbox"/>				F <input type="checkbox"/>			
ARE YOU CURRENTLY IN SCHOOL				Y <input type="checkbox"/>	N <input type="checkbox"/>	HIGHEST GRADE COMPLETED:					
SCHOOL CURRENTLY ATTENDING:											
PLEASE SELECT ALL THAT APPLY(IF NONE, LEAVE BLANK)											
DROPOUT <input type="checkbox"/>		OFFENDER (FELONY OR MISDEAMENOR) <input type="checkbox"/>				DISABLED <input type="checkbox"/>					
PREGNANT/PARENTING <input type="checkbox"/>				HOMELESS, RUNAWAY, FOSTER CARE <input type="checkbox"/>							
PLEASE LIST ALL MEDICATIONS YOU ARE CURRENTLT TAKING:											
PLEASE LIST ALL MEDICATIONS YOU ARE ALLERGIC TO:											
PLEASE LIST ANY PHYSICAL CONDITIONS THAT MAY RESTICT YOU FROM CERTAIN ACTIVITIES AND AMOUNT OF WORK YOU ARE ABLE TO PERFORM. IF ANY, PLEASE EXPLAIN:											

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2014 Subsidized Summer Youth Employment Program Application

INCOME VERIFICATION

NUMBER OF FAMILY MEMBERS IN THAT CURRENTLY LIVE IN YOUR HOUSEHOLD:

TOTAL FAMILY INCOME IN THE LAST SIX MONTHS:

IF **NOT** SUPPORTED BY PUBLIC ASSISTANCE SHOW PROOF FROM THE LIST BELOW:

(CHECK IF APPLICABLE)

TWO (2) CONSECUTIVE PAY STUBS DATED WITHIN THE CURRENT YEAR(MUST INCLUDE PAYEE NAME AND GROSS INCOME); OR CURRENT PENSION AWARD LETTER; OR UNEMPLOYMENT BENEFIT DOCUMENT DATED WITHIN THE CURRENT YEAR; OR IF SELF-EMPLOYED, 2013 TAX RETURN INCLUDING SCHEDULE "C" or "E"

IF SUPPORTED BY PUBLIC ASSISTANCE SHOW PROOF FROM THE LIST BELOW:

(CHECK IF APPLICABLE)

CURRENT OR RECENT AWARD LETTER FROM DCFS (SNAP AMOUNT); OR CURRENT FITAP AWARD LETTER-TANF; OR OFFICIAL LETTER FROM SOCIAL SERVICES (MUST INCLUDE APPLICANT'S NAME, BENEFIT AMOUNT, AND DATE)

CERTIFICATION OF ACCURACY

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE THE CITY OF NEW ORLEANS TO EXAMINE AND COLLECT ALL PERSONAL RECORDS FOR THE PURPOSE OF DETERMINING ELIGIBILITY ON ANY CHILD, ANY FAMILY MEMBERS, AND MY SELF LISTED ON THIS APPLICATION FOR CITY PROGRAMS. I AM AWARE THAT INCORRECT INFORMATION OR FALSE INFORMATION MAY RESULT IN TERMINATION FROM THIS PROGRAM, THE REPAYMENT OF FUNDS AND/OR PROSECUTION FOR PERJURY OR FRAUD.

APPLICANT'S SIGNATURE

DATE

PARENT/GUARDIAN/INSTITUTION SIGNATURE
(FOR APPLICANTS 17 AND UNDER)

DATE

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