



2022

Summer Youth Employment Program

Participant Application (Youth Ages 16-21)

NYCTM
Department of
Youth & Community
Development


**WORKFORCE
CONNECT**
DYCD Youth Employment Programs

Personal Information

1. Social Security Number (Please be accurate) _____ 2. Last Name _____ 3. First Name _____

4. MI _____ 5. Birth Date (MM/DD/YYYY) _____ 6. Sex at Birth _____
 Female Male

Please select your preferred Gender Identity _____ 7. Citizenship Status _____
 U.S. Citizen Permanent Resident Other

8. Selective Service Registration # & Date- Males 18 years of age must be registered with the Selective Service System to participate in the program (if you have not already registered; visit www.sss.gov) _____ OSIS # (DOE Students ONLY) _____
 Date (MM/DD/YYYY) _____ 9. How did you hear about us? _____
 Yes No

10. Street Address _____ 11. Apartment _____ 12. Zip Code _____
 Are you familiar with any of these skills? (check all that apply) _____
 Please Select One _____

13. Do you live in a NYCHA Housing Development? _____ If Yes, Name the Development: _____ 14. Borough _____
 No (If No; Go to question 14) Yes

15. Applicant's Ethnicity (Select one) _____ 16. Applicant's Race (Select one) _____ 17. Other than English, what Language are you most comfortable speaking? _____

18. Applicant's Home Phone # _____ 19. Applicant's Cell Phone # _____ Please select "Yes" if you would like to receive text updates _____ 20. Applicant's Email _____
 Yes No

21 Name of Parent or Legal Guardian (Last Name) _____ 22. First Name _____ 23. Emergency Contact Phone # _____

Educational Status

24. Educational-Student Type _____ 25. Current educational status _____ 26. Please indicate the school system you attend: _____ What school did/do you attend? _____ Indicate last grade completed _____

Income & Other Information

27. Total family income (gross) for the last SIX months _____ 28 (A). Number of family members currently living in applicant's household _____ 28 (B). Applicant's Household Type _____ 29. Is applicant or applicant's family currently receiving public assistance? _____
 Yes No (Skip to #31)

30. Type of Public Assistance (Check all that apply) _____
 Family Assistance S.S.I. Other
 Safety Net/Home Relief Supplemental Nutrition Assistance Program (SNAP)

31. Is the applicant any of the following (Check all that apply) _____
 Disabled Justice Involved Foster Care Does Not Apply ACS Preventative Services Served in the Military Homeless /Runaway Parent

Educational and Career Detail

32. School Major _____ 32. Grade Point Average _____ 34. Where is your school located? (Check One) _____
 In NYC Outside of NYC
 City _____ State _____

35. Start and end dates of your summer break? _____
 From (MM/DD/YYYY) _____ To (MM/DD/YYYY) _____

36. Prior work experience? _____
 Yes No

37. What is the applicant's long-term career goal? List three (3) options: _____

Banking Information

38. Do you have a bank account? _____
 Yes No

39. Interested in opening a bank account? _____
 Yes No

40. Interested in direct deposit? _____
 Yes No

41. Are you covered by Medicaid, Child Health Plus, Family Health Plus or private medical insurance? _____
 Yes No

42. Would you like to receive information about insurance program? _____
 Yes No

Certification of Accuracy: I, the undersigned, certify that all information on this form is true and correct. I understand that my statements are subject to verification. I further understand that any false statements may subject me to criminal prosecution under both New York State Penal Laws, section 175.35 and Federal Law, 18 U.S.C.A. 1001, and to civil action for return of all monies received. I agree and accept that I will abide by all applicable rules and regulations of this program.

Applicant Signature _____ Date: (MM/DD/YYYY) _____ Parent/Guardian Signature _____ Date: (MM/DD/YYYY) _____

Document Checklist: Older Youth (OY) 16-24 Years Old



- Official Picture ID (school, city, state, government issued) *IDNYC Municipal ID will be accepted*
- NYS Driver/Non-Driver's License
- Permanent Resident or Alien Registration Card
- Valid U.S. Passport

*Must have photo of participant
*If dated, must be valid at the date of enrollment



- Birth Certificate
- Benefit Card
- NYS Driver/Non-Driver's License
- Permanent Resident or Alien Registration Card
- Valid U.S. Passport

*If providing Valid U.S. passport, it must be signed by participant



- Social Security Card

*Must be signed by participant



- Home Utility Bill (ex: cable, internet, phone, gas, electric, water)
- Current Lease, Mortgage, Deed, Rent Bill
- Official Mail from a Federal, State or City Agency (ex: IRS, NYCHA, transcript from a Secondary or Higher Education Institution)
- Bank or Credit Card Statement
- Insurance

*Must have date within 6 months of enrollment
*Must include the participant and/or parent/guardian name and address



- Report card (dated within the last 6 months)
- Official school transcript
- NYS Driver's/Nondriver's License

*No additional documents needed if you provided US passport



- Required for Youth under 18 years of age ONLY:** Green working paper card for 16/17 year old youth



- Proof of Selective Service:** Selective Service Registration Card or Selective Service "Online Receipt" Required for males 18 years of age or older (For more information on Selective Service registration requirements please click [here.](#))
- Proof of Disability:** Official documentation as applicable certifying disability from a physician, ACS, HRA, School (IEP from school), Social Service agency or authorized entity on letter head.

WHAT WILL I BE DOING THIS SUMMER?

As a 16-21 year old youth you will participate in a work based experience that will match your interests and provide enriching career exploration, help foster leadership, networking and develop numerous skills. Youth will earn the New York State minimum wage of \$15.00 an hour and may work up to 25 hours per week for six weeks in July and August.

HOW DO I QUALIFY FOR SYEP?

You must be:

- 16-21 years old as of July 5th, 2022
- Reside within the five boroughs of New York City
- Be legally allowed to work in the United States

HOW CAN I APPLY TO SYEP?

To apply to the program you can do one of the following:

- Visit our website www.nyc.gov/dycd and follow the links to fill out the application online or download a paper copy
- Paper applications can also be obtained from one of the community based organizations or Providers operating the program. A complete list of authorized SYEP providers can be found on the DYCD website (www.nyc.gov/dycd)
- Complete paper applications must be submitted before the application deadline to the Provider of your choice
- Youth may also be recruited for specialized programming directly by SYEP providers
- DYCD cannot mail applications to you, nor do we accept applications by mail

WHAT IS THE SYEP APPLICATION DEADLINE?

The deadline to submit a complete SYEP application is April 22nd, 2022.

HOW ARE YOUTH SELECTED TO THE PROGRAM?

Youth can be selected to the program via two options, through a lottery or direct recruitment by an SYEP provider to specialized programming.

DYCD will conduct a lottery to select participants to the program. There will be more than one lottery to ensure that all seats in the program are filled. If you are selected by the lottery you will be contacted via the email address and/or phone number you provide in your application. You can check the status of your application by visiting the DYCD website (www.nyc.gov/dycd)

HOW LONG IS SYEP?

SYEP is 25 hours a week for six weeks from July 5 to August 13 or July 11 to August 20

HOW WILL I BE PAID?

Participants will earn the New York State minimum wage of \$15.00 an hour and may work up to 25 hours per week for six weeks in July and August.

Participants are paid weekly with a debit card or with Direct Deposit to a bank account of their choice.

DO I HAVE TO PAY ANY FEES TO APPLY OR WORK FOR SYEP?

No. DYCD does not require a fee for applying to SYEP and no one is allowed to charge a fee for participation or application entry.

During the summer, you will be responsible for your own transportation to and from work as well as your own meals. These are the only out-of-pocket costs that you should incur while working for SYEP.