



Fall Youth Employment Application

If you are handwriting your application, **please write clearly in blue or black.** If we can't read your application, you will not get our emails informing you of what to do next. Submitting your application is only step one of the employment process. You must be 14-24 years old and a year-round resident of the City of New Rochelle. **(Positions for youth 14-16 years old and weekly hours for all are contingent upon each worksite.)**

All youth who would like to work for the fall must submit a work permit. Work Permits are giving out through the school district located on the 3rd floor of city hall.

- 14 -15 years old must have a **BLUE** card
- 16 -17 years old must have **GREEN** card
- 18 & older **DO NOT** need a work permit

Submitting Your Job Application:

Completed applications can be submitted at the New Rochelle Youth Bureau Monday – Friday 8:30am - 4:30pm or Mailed to 515 North Ave, New Rochelle NY, 10801 Attn: Shaylah Brickle. **Proof of Income is required.**

Job Service Program is now available for students who need assistance with creating resumes and filling out job applications for employment outside of the Youth Bureau. The Youth Bureau Office will offer expanded hours for the Job Service Program by appointment only on Thursdays until 6PM.

*Fall employment runs for six consecutive weeks. You will only be paid for the period you worked. There will be different start dates for different programs. However, once you start working, that is when **YOUR** six weeks start. Students will be required to submit a progress report signed by their teachers to continue working.*

Job Notification:

Please note, upon receiving a job we will require that additional forms be completed with your parents/guardian if you are under the age of 18. You will be unable you start working without these forms being submitted.

- Birth Certificate (copy)
- Social Security Card (copy)
- Working Papers (Original kept on file & returned on last check)
- Proof of Residence (ex: email from school, report card, W-2 form or pay stub)
- Picture ID such as: High School ID, Driver's License, Non-Driver ID Card, Learner's Permit, Alien Registration Receipt Card, Green Card and/or Passport.
- Direct deposit form from your bank with your account information or a Voided Check
- I-9 Form
- W-4 Form
- Code of ethics, Sexual harassment, Work Violence Form
- Photo Release
- Resignation Form





CITY OF NEW ROCHELLE
515 NORTH AVENUE
NEW ROCHELLE, NY 10801
(914) 654-2045



**APPLICATION FOR YOUTH EMPLOYMENT
(YOUTH BUREAU – NEW ROCHELLE RESIDENTS ONLY)**

LAST NAME	FIRST NAME	MI	SOCIAL SECURITY NUMBER
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STREET ADDRESS (Apt #)	CITY	STATE	ZIP CODE
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CELL NUMBER: _____ DATE OF BIRTH: _____

E-MAIL: _____ @ _____

PLEASE USE A VALID EMAIL ADDRESS NOT AN NREDLEARN.ORG EMAIL

Name of Parent/Guardian _____

Parent/Guardian Phone Number _____

Parent/Guardian Email Address: _____

This program provides youth ages 14 yrs. - 24 yrs. with job readiness skills training and actual work experience. The program operates for six (6) weeks throughout the fall. Youth can work up to ten (10) hours per week at \$15.00 per hour. (Positions for youth 14-16 years old and weekly hours for all are contingent upon each worksite.)

Reminder, all New York State youth residents between the ages of 14 years – 17 years must have a valid work permit to be employed. All youth must provide proof of valid work permit upon submission of application to be considered for employment.

For applicants (18-21 years of age,) assigned to youth programs only (camps, middle school, etc.), they will be required to complete a civil service application, adhere to a drug screening, clear New York Department of Criminal Justice System Sex Offender Registry and any additional criminal and employment background checks deemed applicable per the NY State Comptroller's office as well as the Westchester County Health Department. This process will be implemented upon job offer and program placement.

DEADLINE: OCTOBER 31, 2022

FOR OFFICIAL USE ONLY

Proof of Work Permit

Yes Date _____ Initialed by: _____ No Date _____

	NAME & ADDRESS OF SCHOOL	NUMBER OF YEARS COMPLETED BY JUNE OF THIS YEAR	TYPE OF COURSE OR DEGREE	DID YOU GRADUATE
GRAMMAR SCHOOL, HIGH SCHOOL OR EQUIVALENCY DIPLOMA		8 9 10 11 12		
COLLEGE, UNIVERSITY, PROFESSIONAL OR TECHNICAL SCHOOL		1 2 3 4		

EMPLOYMENT HISTORY: LIST YOUR LAST TWO PAID OR VOLUNTEER POSITIONS:					
NAME, ADDRESS & BUSINESS OF EMPLOYER	AVERAGE NUMBER OF HOURS PER WEEK	EMPLOYED		TITLE & DUTIES	
		FROM	TO		
		Mo.	Yr.	Mo.	Yr.

REFERENCES: PLEASE LIST THREE (3) REFERENCES (COMBINATION OF PROFESSIONAL AND PERSONAL – CAN NOT BE A FAMILY MEMBER)

NAME	ADDRESS	RELATIONSHIP	PHONE #

ANSWER ALL QUESTIONS BY PLACING "X" IN THE APPROPRIATE COLUMN.	YES	NO
A) WERE YOU EVER DISMISSED OR DISCHARGED FROM AN EMPLOYMENT FOR REASONS OTHER THAN LACK OF WORK OR FUNDS?		
B) DID YOU EVER RESIGN FROM ANY EMPLOYMENT RATHER THAN FACE DISMISSAL?		
C) DID YOU EVER RECEIVE A DISCHARGE FROM THE ARMED FORCES OF THE UNITED STATES WHICH WAS OTHER THAN "HONORABLE" OR WHICH WAS ISSUED UNDER OTHER THAN HONORABLE CIRCUMSTANCES?		
D) HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE AGAINST THE LAW?		
E) HAVE YOU EVER FORFEITED BAIL OR OTHER COLLATERAL?		
F) DO YOU NOW HAVE ANY CRIMINAL CHARGES AGAINST YOU?		

If you answered "YES" to any of the Questions in A-F above, you may give specifics below. If you elect not to provide specifics, however, or if such an explanation is insufficient, you may be required to submit further information. None of the above circumstances represents an automatic bar to employment. Each case is considered and evaluated on individual merits in relation to the duties and responsibilities of the position(s) for which you are applying.

NOTE: PLEASE CHECK TO MAKE SURE THAT ALL APPROPRIATE QUESTIONS HAVE BEEN ANSWERED. AN INCOMPLETE APPLICATION MAY RESULT IN ITS DISAPPROVAL. ALL STATEMENTS ARE SUBJECT TO VERIFICATION.

THE NEW YORK STATE HUMAN RIGHTS LAW PROHIBITS DISCRIMINATION IN EMPLOYMENT BECAUSE OF AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS OR CRIMINAL RECORD. ACCORDINGLY, NOTHING IN THIS APPLICATION FORM SHOULD BE VIEWED AS EXPRESSING, DIRECTLY OR INDIRECTLY, ANY LIMITATION, SPECIFICATION, OR DISCRIMINATION AS TO AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS, OR CRIMINAL RECORD IN CONNECTION WITH EMPLOYMENT.

AFFIRMATION: I affirm that the statements made on this application, including any attached papers, are true. (Withholding relevant information or supplying inaccurate information will result in your disqualification. Notice to appear for the test constitutes only conditional approval of your application. Individuals appointed from the resultant eligible list will be called upon to document any information provided on this application.)

_____ Date

_____ Signature - Student Signature

Youth Bureau
515 North Avenue
New Rochelle, NY 10801



Tel (914) 654-2045
Fax (914) 654-2046

Kelly Johnson, Jr.
Executive Director

Your Choice. Your Path. Your Future.

To: All Parents/Guardians
From: Kelly Johnson, Executive Director
Subject: Income Verification Form

Family Size	1 Person Household	2 Person Household	3 Person Household	4 Person Household	5 Person Household	6 Person Household
	\$77,650	\$88,750	\$99,850	\$110,900	\$119,800	\$128,650

Applicant's Name: _____ **Age:** _____

Household Size (total): _____ **Parent (s) Total Gross Annual Income:** _____

In addition, for each applicant, the Parent/Caregiver must provide proof of income through one of the following documents upon submission of application:

- 1) Employer Statement – Notarized***
- 2) Pay Stub***
- 3) W-2 Form***

****Applications will be considered incomplete until all requested documents are received***

I certify that the above information is true to the best of my knowledge.

PRINT NAME OF PARENT/GUARDIAN

SIGNATURE

DATE

Please complete and return on or before **MONDAY, OCTOBER 31, 2022**. **ONLY THOSE CANDIDATES THAT HAVE RETURNED ALL REQUIRED DOCUMENTS WILL BE INTERVIEWED.**