

NYC Ladders for Leaders

Participant Application

Department of Youth & Community Development





Personal Information

1. Social Secur	ity Number	(Please be accu	rate)		2. Last Na	me		3. First Nar	ne		
4. MI	5. Birth Date (MM/DD/YYYY) 6. Sex at Birth			Please select your prefer Gender Identity		7. Citizenship Status					
				Female	Male	U.;	S. Utizen	Permanent	Resident	Other	
be registered v	with the Se	tration # & Date lective Service S already register	ystem to part	icipate in the	50	5 # (DOE Students ONI (MM/DD/YYYY)	·	did you hear abo	e	Do you have access to electronic device with nternet accessibility? Yes No	
10. Street Add	ress				<u>11. A</u>	partment	12	. Zip Code	_	Are you familiar with any of these skills? (check all that apply	
	in a NYCHA Go to quest	A Housing Develo	opment?	If Ye	s, Name the	e Development:		14. Bor	ough		
15. Applicant's	•		6. Applicant's	Race (Select o	one)	17. Other than En speaking?	nglish, wha	t Language are	you most	comfortable	
18. Applicant's	Home Pho	ne # 1	9. Applicant's	Cell Phone #		Please select "Yes" if to receive text update	es	like <u>20.</u> App	licant's Ei	nail	
						Yes	No				
21 Name of Par	ent or Lega	al Guardian (Last	t Name)	22. First Na	me		2	3. Emergency Co	ontact Pho	one #	
Educational	Status										
24. Educationa		fype educ:	urrent ational status		ase indicate system you		hool did/d	o you attend?	Indie com	cate last grade pleted	
		nation					30. Tvp	e of Public Assis	tance (Ch	eck all that apply)	
27. Total family income (gross) for the last SIX months 28 (A). Number of family members currently living 28 (B). Applic in applicant's household Ty			29. Is applicant or ant's applicant's family curren receiving public assistan		ly Family Assistance		S.S.I.	Other			
					Y	(Saf	Safety Net/Home Relief		Supplemental Nutrition Assistance Program (SNAP)	
31. Is the applic	ant any of	the following (Cl	heck all that a	pply)							
Disabled	Offende Involve	er/Justice d	Foster Care	Does No Apply	110	'S Preventative rvices	Served in Military		Homeless /Runawa		
ducational c	and Caree	er Detail									
32. School Major		32. Grade Point Average	(Check One)		ol located?	35. Start and end d of your summer br	lucos	k? experience? lon		37. What is the applicant's long-term career goal? List three (3) options:	
					e of NYC	From (MM/DD/YYYY)					
Banking Info	rmation		City	State		To (MM/DD/YYYY)					
account?	B. Do you have a bank count?39. Interested in opening a bank account?40. Interest deposit		deposit?		•	Family He	ily Health Plus or inform		ould you like to receive nation about insurance am?		
Yes	No	Yes	No	Yes	No	- Yes		No progra			
							res	NO	Y	les No	
ertification of Accur ay subject me to cr l applicable rules an	iminal prosecu	rtion under both New	all information on York State Penal L	aws, section 175.3.	and correct. I 5 and Federal 1M/DD/YYYY)	mderstand that my statemen .aw, 18 U.S.C.A. 1001, and to cir	nts are subject	to verification. I fur	her understa	and that any false statement:	

Part 2 - ESSAY QUESTIONS*

Q1: What life event has had the most influence on you and why? (250 words or more)

For questions #2 + 3, you must select and answer one out of the two:

Q2: What are you hoping to gain from the Ladders for Leaders program that will help you achieve your future career goals? (250 words or more)

Q3: What career field are you interested in and why? If you are undecided, what interests would you like to pursue further and why? (250 words or more)

RESUME (Attach a hard copy) - Each field represents a different section of your resume. Please enter the information accordingly.*

- CONTACT INFORMATION (Name, Address, Phone/Cell number, Email
- EDUCATION
- EMPLOYMENT HISTORY / WORK EXPERIENCE
- VOLUNTEER / LEADER EXPERIENCE
- HONORS & AWARDS
- EXTRACURRICULAR ACTIVITIES
- SKILLS

TRANSCRIPT (Attach a hard copy)*

APPLICATION MUST BE SUBMITTED BY 11:59PM February 25th, 2022.

For more information about NYC Ladders for Leaders, please visit us at www.nyc.gov/Ladders or call DYCD at (800) 246-4646.



2022 Ladders for Leaders Provider List

Provider Name	Address	Contact Information	Worksite Examples		
CommonPoint Queens (Formerly known as Central Queens Y)	67-09 108th Street, Forest Hills, NY 11375	718-268- 5011 ext. 299 commonpoint queens.org	Bank of America, Ernst & Young, Morgan Stanley, Blackrock, Blackstone, Morgan Stanley, Macy's, NASDAQ, Hughes Hubbard & Reed, Goldfarb & Fleece, LLP, Kassatex, Kickstarter, Laura Devine Attorneys, Lawline, Lincoln Center, Medidata, Morgan Stanley, Museum of the Moving Image, National Grid, Neuberger Berman, and Rudin, etc.		
PENCIL, Inc.	30 West 26th Street, 5th Floor, New York, NY 10010	646-638-0565 pencil.org	Amalgamated Bank, Deloitte, Xandr, Bloomberg , KPMG, LinkedIn , Paul Hastings LLP, Boston Consulting Group, Beazley Group, Blueberry Builders, LLC, Uncubed, OEM, Department of Design and Construction, WeWork, Uptown Stories Inc., DonorsChoose.org, Tishman Speyer, Jack Resnick+Sons, Sotheby's, and Design Incubator Inc., etc.		

Applicants can apply to any of the above providers regardless of their borough of residence.

If you are selected for a Ladders opportunity, you will need to submit certain documents online via a secured document submission site. You must submit **COPIES** of one (1) item from categories 1-9 listed below as it applies to you. <u>These items are needed to</u> <u>officially complete your enrollment so that you are eligible for Ladders for Leaders</u>. Note that some documents may satisfy more than one category (e.g. U.S. Birth Certificate or current U.S. Passport for categories 2 and 7).

Reminder: ONLY COPIES OF THESE DOCUMENTS WILL BE ACCEPTED

1. Proof of Identity

 Official Picture ID (school, city, state, government issued) <u>IDNYC Municipal ID</u> will be accepted

2. Proof of Age

- Birth Certificate OR
- Benefit Card **OR**
- NYS Driver/Non-Driver's License OR
- Alien Registration Card OR
- Valid U.S. Passport

3. Proof of Social Security Number

Social Security Card (ONLY)

4. Proof of Address (Dated within the last 6 months)

- Home Utility Bill OR
- Current Lease, Mortgage, Deed OR
- □ Current Cable Bill (Must have Phone Service Listed) **OR**
- Official Mail from a Federal, State or City Agency

5. Ladders Application

☐ A signed Ladders application is required for all youth. Youth under the age of 18 are required to have the signature of a parent or guardian.

6. Proof of Employment Authorization

- Report Card (dated within the last 6 mos) OR
- Official School Transcript OR
- NYS Driver/Non-Driver's License OR
- Voter's Registration Card OR
- U.S. Military Card /Draft Record **OR**

7. Proof of Educational Status

- Official High School Transcript OR
- Official College Transcript OR
- Unofficial College Transcript w/ copy of College ID

8. Proof of Citizenship/Alien Status

- □ Valid U.S. Passport OR
- U.S. Birth Certificate **OR**
- Alien Registration Card OR
- 🔲 I-94, I-551, I-797 **OR**
- Certificate of Naturalization **OR**
- Employment Registration Card

9. Proof of Family Income (Dated within the last 6 months)

If Supported by Public Assistance

- $\hfill\square$ Current EBT Card (with parent/guardian name) AND a recent store receipt OR
- Current Benefit Budget/SNAP Letter **OR**
- □ Official letter from Social Services (Must include applicant's name, Benefit # and date)

OR

If Not Supported by Public Assistance

- □ Two (2) <u>consecutive</u> pay stubs dated within the last six months (Must include payee name, and gross income) **OR**
- □ 2021 W-2 form and one (1) pay stub dated within the last six months OR
- Current Pension Award letter OR
- Current SSA Award letter OR
- $\hfill\square$ Unemployment Benefit Document dated within the last six months \mathbf{OR}
- □ If self-employed, **2021** Tax Return including Schedule "C" or "E" (if receiving rental income)

10 Working Papers (*Must be age applicable*)

Working papers can be acquired through your school. If you are not attending school, call 311 or contact your local District Office.

<u>Required for Youth under 18 years of age ONLY</u>

16 and 17 years of age: Green Card

11. Please provide ONLY if applicable

- Selective Service Registration Card OR Selective Service "Online Receipt" Required for males 18 years of age or older
- Proof of **Disability**: Official documentation as applicable certifying disability from a physician, ACS, HRA, School, Social Service agency or authorized entity.

<u>Please note:</u> all references to the word <u>current</u> mean documents dated within <u>the last six (6) months</u> or where applicable, documents which are still valid and have not expired. The status of your application can be found at www.nyc.gov/dycd.