



2022

Summer Youth Employment Program (SYEP)

Participant Application (Youth Ages 14-15)

Applicable to all SYEP program options



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		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	
13. Do you live in a NYCHA Housing Development? No (If No; Go to question 14) Yes		If Yes, Name the Development:		14. Borough	
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 #		20. Applicant's Email	
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
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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:
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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	
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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)
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Document Checklist: Younger Youth (YY) 14-15 Years Old

*Some documents may fulfill multiple requirements

Ex: US Passport or NYS Driver/Non-Driver's License can be accepted to meet the requirement for the following categories:


- Proof of Identity
- Proof of Age
- Proof of Employment Authorization



Proof of Identity

- 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



Proof of Age

- 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



Proof of Social Security Number

- Social Security Card


*Must be signed by participant



Proof of Address

- 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



Proof of Employment Authorization

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

*No additional documents needed if you provided US passport



Provide proof ONLY IF applicable

- 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.