

**Summer
Youth
Employment
Program
(SYEP)**

NYC
PROBATION

career
services

Career
Exploration

Work
Experience

Job
Readiness

**INTERESTED
IN WORKING
SUMMER 2018?**

NYC

Department of
Youth & Community
Development

Prepare your documents now

Contact your Probation Officer
for program details and enrollment information

Paid 6 Week Employment Program for NYC Youth on Probation
Must be between 14-24 years old



SYEP applicants who are on probation will need to bring certain documents to the SYEP coordinators in order to be eligible for consideration. You must submit COPIES of one (1) item from categories 1-9 listed below as it applies to you. **These items are needed to officially complete your enrollment so that you are eligible for a SYEP job.** Note that some documents may satisfy more than one category (e.g. U.S. Birth Certificate or current U.S. Passport for categories 3 and 6).

Reminders: ONLY COPIES OF THESE DOCUMENTS WILL BE ACCEPTED. ALL DOCUMENTS MUST BE SUBMITTED TOGETHER.

1. Proof of Identity

Official Picture ID with Date of Birth
(school, city, state, government issued)
New: IDNYC will be accepted

2. 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**

3. Proof of Age

Birth Certificate **OR**

Benefit Card **OR**

NYS Driver/Non-Driver's License **OR**

Alien Registration Card **OR**

Valid U.S. Passport **OR**

4. Proof of Social Security Number

Social Security Card (**ONLY**)

5. Working Papers (*Must be age applicable*)

If you are under the age of 18 at the time of the application, you must submit your most current working papers.

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

14 and 15 years of age: Blue Card

16 and 17 years of age: Green Card

6. 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 **OR**

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

Home Utility Bill **OR**

Current Lease **OR**

Current Cable Bill (Must have Phone Service Listed) **OR**

Official Mail from Federal, State, or City Agency **OR**

Letter from Case Planner (*If Youth in Foster Care*) **OR**

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

Youth in Foster Care are exempt

If Supported by Public Assistance

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) consecutive pay stubs dated within the last 6 months (*Must include payee name, and gross income*) **OR**

2015 W-2 form and one (1) pay stub dated within the last 6 months **OR**

Current Pension Award letter **OR**

Current SSA Award letter **OR**

Unemployment Benefit Document dated within the last 6 months **OR**

If self-employed, **2015** Tax Return including Schedule "C" or "E" (if receiving rental income) **OR**

9. SYEP Application

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

Case Planner Signatures if Youth in Foster Care

Please provide ONLY if applicable

10. **Selective Service** Registration Card **OR**

Selective Service "Online Receipt"

Required for males 18 years of age or older

11. Proof of **Disability**: Official documentation as applicable

certifying disability from a physician, ACS, HRA, School, Social Service agency or authorized entity.

*Please note: all references to the word **current** mean documents dated within the last six (6) months or where applicable, documents which are still valid and have not expired.*

The following four documents and the SYEP application require original documents. (copies will not be accepted)

Letter of Affiliation

Participant Enrollment Survey

I-9

W-4