



**Summer FINAL Youth 2 Work (Y2W)  
Youth Application**

Name \_\_\_\_\_  
last first middle (other names used in previous jobs)

Address \_\_\_\_\_  
number street city zip code

Contact Info \_\_\_\_\_  
Home or Cell Message Number Email

Parents Name \_\_\_\_\_  
Last fist middle (other names used)

Contact info: Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**WORK RELATED EXPERIENCE (PREVIOUS EMPLOYMENT, SCHOOL CLUBS, VOLUNTEERISM)**

Employer (clubs, volunteerism, etc.)	Date Employed		Duties Performed
Name of Employer/Club:	From	To	
	MO/YR	MO/YR	
Position held (VP, Treasurer, member)?			
Employer (clubs, volunteerism, etc.)	Date Employed		Duties Performed
Name of Employer/Club:	From	To	
	MO/YR	MO/YR	
Position held? (VP, Treasurer, member)?			

**Do you have reliable transportation?**  Yes  No  
**Will you need a bus pass?**  Yes  No

REFERENCES: Must list 3 / Do not include family members / Include at least one previous supervisor/teacher/counselor/coach from work/school/clubs/church/sports, etc.

NAME	PHONE NUMBER	EMAIL	OCCUPATION

**EDUCATIONAL RECORD**

SCHOOL	NAME /ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS ATTENDED		LIST DEGREE OR DIPLOMA AND YEAR RECEIVED
			Start	End	
HIGH SCHOOL					
COLLEGE (Ex. HOOPS/ACE)					

**OTHER SKILLS/QUALIFICATIONS** (honors/membership/certification/CPR/office software/food handlers/etc.)

---

---

What tribe(s) are you? \_\_\_\_\_

Are you enrolled with a tribe?  Yes  No

If yes, what tribe? \_\_\_\_\_

Indicate <u>what languages</u> you can	<u>speak</u>	<u>read</u>	<u>write</u>

Have you been convicted of a crime?  Yes  No

A conviction may not necessarily disqualify an applicant from employment. If "YES" please fully explain the circumstances and provide date:

Please provide other information you feel may be helpful to us in considering your application (i.e. job restrictions such as cannot lift over 50 pounds, cannot stand for more than two hours) any special needs.

Tell us what you hope to gain from this summer employment program.

---

I verify that answers given herein are true and complete to the best of my knowledge. I understand that false or misleading information given in my application or interview(s) may result in my removal from the program. I understand, also, that I am required to abide by all rules and regulations of the Phoenix Indian Center and adhere to the weekly employment/internship schedule when assigned. I understand that I am required to complete the Job Preparedness Training and Certification classes and arrive to work as scheduled. ***(Any applicant under the age of 18 also requires a parental/guardian signature authorization below)***

**Signature of Applicant**

**Date**

---

I certify that answers herein are true and complete to the best of my knowledge. I further authorize my child (under the age of 18) may participate in a youth employment/internship program that requires attendance and active participation. I understand that it is the responsibility of my child and I to ensure that my child completes the Job Preparedness Training and Certification classes and arrives to work as scheduled.

**Signature of Parent/Guardian**

**Date**

---

WE ARE AN EQUAL OPPORTUNITY EMPLOYER – AMERICAN INDIAN PREFERENCE

Internal Use Only Received By _____ Date _____ Time _____
--