

# Capital Region 2009 Youth Program Application

<b>Step 1</b>	<p>Complete the attached application and return it to Attention Summer Youth Program to the appropriate address listed on the back of the application. Remember to include your personal statement based on your career interest.</p> <p><b>PARTICIPATION IN PRE-EMPLOYMENT/ WORK READINESS TRAINING IS REQUIRED!</b></p>
<b>Step 2</b>	<p>Family income is a determinant of your eligibility for participation in the WIA Youth Program. Upon receipt of your application, you and your parent/guardian (ages 14-18 only) will be required to schedule and attend an eligibility determination appointment which will include a request for documentation of the information you provided including, family size and income information. You must supply the requested documentation during the eligibility determination meeting. Failure to do so will result in your not being considered for participation.</p>
<b>Step 3</b>	<p>During your eligibility determination appointment, you will know whether or not you appear to be eligible to participate in the summer program and have an opportunity to identify the program activity(s) you are most interested in. A letter will follow the initial appointment with additional information on when and where to report for assessment of your needs and to complete a service plan that will identify the specific activities you will be assigned to and the starting date of the activities. The letter will also set the date for your orientation and outline any additional steps you will need to take before participating in the Summer Youth Employment Program.</p>

**The Capital Region Youth Program is a two-pronged program; youth may be selected to participate in the 12-month Workforce Investment Act (WIA) program, which begins in the summer and continues with required enrichment activities throughout the year, or youth may be selected to participate in the summer only. PLEASE KEEP THIS IN MIND AS YOU COMPLETE YOUR APPLICATION. You will be developing a plan for services that may include setting goals to be accomplished beyond the summer program.**

**If you have any questions, please contact:**

**City of Richmond Residents:**  
**William Byrd Community House**  
**Todd Elliott**  
**Phone: (804) 643-2717**

**County Residents:**  
**Ashlin Management Group**  
**Jeneane Harris**  
**Phone: (804) 271-8510**

**DOCUMENTATION TO VERIFY ELIGIBILITY IS REQUIRED**

The Capital Region Workforce Partnership is an equal opportunity program/employer. Auxiliary aides and services are available upon request to individuals with disabilities. Virginia Relay Center (VRC) TDD Callers: 1-800-828-1120 Voice Callers: 1-800-828-1140  
Please keep this cover page for your records.

## CAPITAL REGION YOUTH ELIGIBILITY CHECKLIST

Name: \_\_\_\_\_

Date: \_\_\_\_\_

ELIGIBILITY ITEM	ATTACH VERIFICATION DOCUMENTATION (check appropriate response-one verification per eligibility required)												
<p><b>Social Security Number</b></p> <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>											<input type="checkbox"/> DD214 <input type="checkbox"/> Drivers license (If SSN is shown) <input type="checkbox"/> Employment Records <input type="checkbox"/> IRS Form 1722 <input type="checkbox"/> Letter from Social Services Agency <input type="checkbox"/> Pay Stubs <input type="checkbox"/> Social Security Benefits <input type="checkbox"/> Social Security card/Notice of SS Assignment) <input type="checkbox"/> School record <input type="checkbox"/> UI Records (If Name and SSN is shown) <input type="checkbox"/> W-2 Form <input type="checkbox"/> Other (specify) _____		
<p><b>Selective Service Status</b>            If male and 18 years or older and born on or after January 1, 1960 registered for Selective Service</p>	<input type="checkbox"/> Form DD214 <input type="checkbox"/> Internet verification/Registration ( <a href="http://www.sss.gov">http://www.sss.gov</a> ) <input type="checkbox"/> Not Applicable <input type="checkbox"/> Report of Transfer or Discharge <input type="checkbox"/> Selective Service Advisory Opinion Letter <input type="checkbox"/> Selective Service Registration Record (Form 3A) <input type="checkbox"/> Stamped Post Office Receipt of Registration <input type="checkbox"/> Other (specify) _____												
<p><b>Citizenship/Right to Work</b>            U.S. Citizen or registered alien</p>	<input type="checkbox"/> Alien Registration Card Indicating Right to Work <input type="checkbox"/> Baptismal certificate (If Place of Birth is shown) <input type="checkbox"/> Birth Certificate <input type="checkbox"/> DD214 (If Place of Birth is shown) <input type="checkbox"/> Foreign Passport Stamped Eligible to Work <input type="checkbox"/> Hospital Record of Birth (If Place of Birth is shown) <input type="checkbox"/> Naturalization Certificate <input type="checkbox"/> U S Passport <input type="checkbox"/> Other (specify) _____												
<p><b>Age</b>            Is between the ages of 14 and 24 years</p>	<input type="checkbox"/> Birth certificate <input type="checkbox"/> School records <input type="checkbox"/> Driver's license <input type="checkbox"/> VA Identification card <input type="checkbox"/> Other (specify) _____												
<p><b>Residency</b> Is a resident of :</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> City of Richmond</td> <td><input type="checkbox"/> Charles City</td> <td><input type="checkbox"/> Chesterfield</td> <td><input type="checkbox"/> Goochland</td> </tr> <tr> <td><input type="checkbox"/> Hanover</td> <td><input type="checkbox"/> Henrico</td> <td><input type="checkbox"/> New Kent</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Powhatan</td> <td><input type="checkbox"/> Other _____</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> City of Richmond	<input type="checkbox"/> Charles City	<input type="checkbox"/> Chesterfield	<input type="checkbox"/> Goochland	<input type="checkbox"/> Hanover	<input type="checkbox"/> Henrico	<input type="checkbox"/> New Kent		<input type="checkbox"/> Powhatan	<input type="checkbox"/> Other _____			<input type="checkbox"/> Driver's license <input type="checkbox"/> VA Identification card <input type="checkbox"/> School records <input type="checkbox"/> Postmarked mail addressed to applicant <input type="checkbox"/> Foster Care Custody Record <input type="checkbox"/> Other (specify) _____
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<input type="checkbox"/> Powhatan	<input type="checkbox"/> Other _____												
<p><b>Economic Eligibility</b>            Youth is Economically Disadvantaged</p>	<input type="checkbox"/> Cash welfare <input type="checkbox"/> Food stamps <input type="checkbox"/> Foster care <input type="checkbox"/> Below poverty guidelines												

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<p><b>Barriers</b> Youth is an individual who is one or more of the following:</p> <p><input type="checkbox"/> Deficient in basic literacy skill</p> <p><input type="checkbox"/> A school dropout</p> <p><input type="checkbox"/> Homeless, runaway or foster child</p> <p><input type="checkbox"/> Pregnant or parenting</p> <p><input type="checkbox"/> An offender</p> <p><input type="checkbox"/> Is an individual who requires additional assistance to complete an educational program, or to secure and hold employment.</p>	<p><input type="checkbox"/> Test results</p> <p><input type="checkbox"/> School records</p> <p><input type="checkbox"/> Social service verification</p> <p><input type="checkbox"/> Birth certificate</p> <p><input type="checkbox"/> Self-Certification Form</p> <p><input type="checkbox"/> Court record</p> <p><input type="checkbox"/> Other (specify) _____</p>

Documentation and Data Collected by:

Case Manager Typed Name  \_\_\_\_\_

\_\_\_\_\_  
Case Manager Signature

\_\_\_\_\_  
Date