

# WE ARE YOUR DOL



Department  
of Labor

New York Youth Jobs Program  
1220 Washington Avenue  
Building 12, Room 408  
Albany, NY 12226

## New York Youth Jobs Program: 2024 Youth Certification

Use this form to apply for 2024 youth certification in the New York Youth Jobs Program.

The applicant (you), must complete all items: one through eighteen, except item 11. Item 11 is optional.

- If you are 16 or 17 years old your parent or guardian must sign and submit the application for you.
- If you have little or no access to a computer, mail the completed and signed application to the address above or fax it to (518) 457-3617. We do not accept applications submitted for you by a business or tax consultant.
- If you have questions or need help, please call (877) 226-5724 or email [info@youthworks.ny.gov](mailto:info@youthworks.ny.gov).

1. Last name: \_\_\_\_\_

First name: \_\_\_\_\_ Middle initial: \_\_\_\_\_

2. Birth date (mm/dd/yyyy): \_\_\_\_\_ 3. Social Security Number: \_\_\_\_\_

4. Home address: \_\_\_\_\_

5. City: \_\_\_\_\_ 6. State: \_\_\_\_\_ 7. Zip: \_\_\_\_\_

8. I currently live in the town, or city limits, of the following target area, check one:

- |                                       |   |                                    |  |                                       |
|---------------------------------------|---|------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Albany       | <input type="checkbox"/> Brookhaven                 | <input type="checkbox"/> Buffalo   | <input type="checkbox"/> Hempstead             | <input type="checkbox"/> Mount Vernon |
| <input type="checkbox"/> New Rochelle | <input type="checkbox"/> New York City (5 boroughs) | <input type="checkbox"/> Rochester | <input type="checkbox"/> Schenectady           | <input type="checkbox"/> Syracuse     |
| <input type="checkbox"/> Utica        | <input type="checkbox"/> White Plains               | <input type="checkbox"/> Yonkers   | <input type="checkbox"/> Any Other Area: _____ |                                       |

9. Email: \_\_\_\_\_

10. Main phone: \_\_\_\_\_ 11. Other phone (optional): \_\_\_\_\_

12. a. I am currently attending high school .....  Yes  No

b. I am currently enrolled in a High School Equivalency (HSE) program .....  Yes  No

13. Are any of the following four statements true? .....  Yes  No

- I am currently unemployed.
- I was unemployed prior to completing this application.
- I do not have enough paid work.
- The work I have does not make use of my skills and training.

14. I am 16 or 17 years old. I have my parent's or guardian's permission to submit this application .....  Yes  No

If 'Yes,' complete items a through c.

a. Parent/Guardian First name: \_\_\_\_\_

b. Last name: \_\_\_\_\_

c. Phone: \_\_\_\_\_

15. I have working papers .....  Yes  No

16. a. I am 18 to 24 years old .....  Yes  No

b. Are any of the following five statements true? .....  Yes  No

- I have a high school diploma.
- I have a General Education Development diploma (GED).
- I have High School Equivalency (HSE) diploma.
- I have satisfactorily completed a Test for Assessing Secondary Completion (TASC) exam.
- I am enrolled in a Treatment Accountability for Safer Communities (TASC) program.

17. I would like the Department of Labor to contact me by  Phone or  Email

Note: Unless you choose phone, we will use your email for more efficient communication.

## New York Youth Jobs Program: 2024 Youth Certification Qualifications:

To participate in the New York Youth Jobs Program:

- You must be 16 to 24 years old, and
- You must live in one of the target areas of New York State listed in item nine on page one, and
- You must be unemployed, and
- At least one of the following statements must apply to you:
  - I am over 18 years of age and do not have a high school diploma or a General Educational Development (GED) or High School Equivalency (HSE) diploma.
  - I am a member of a family that is receiving:
    - Assistance from Temporary Assistance for Needy Families (TANF).
    - Supplemental Nutrition Assistance Program (SNAP) benefits (food stamps).
    - Social Security Income (SSI) benefits.
  - I am receiving a free or reduced-cost school lunch.
  - I was referred to this program by a rehabilitation agency approved by the state, or an employment network under the Ticket to Work Program.
  - I have served time in jail or prison or I am on probation or parole.
  - I am pregnant or a parent.
  - I am homeless.
  - I am currently or was in foster care or the custody of the Office of Children and Family Services.
  - I am a veteran.
  - I am the daughter or son of a parent who is currently in jail or prison, or was in jail or prison within the past two years.
  - I am the daughter or son of a parent who is collecting unemployment insurance.
  - I live in public housing or receive housing assistance such as a Section 8 voucher.
  - I have another risk factor not identified above

### 18. Agreement:

**I swear** that I currently meet the qualifications listed above in the New York Youth Jobs Program: 2024 Youth Certification Qualifications section.

**I understand** that I must provide private, personal information on this application to qualify for the program.

**I understand that I do not** need to explain why I qualify to anyone I ask for a job, or who gives me a job, or anyone who I work with.

**I agree** to allow the New York State Department of Taxation and Finance to share my wage record with the New York State Department of Labor.

**I believe** the information submitted in this application is true, correct and complete.

**I understand** that the New York State Department of Labor will make sure the information submitted in this application is true and may ask me for more information or details.

**I am aware** that there are consequences for filing false documents or other information with the government.

**I agree to the statements above.**

a. Signature (If you are under 18, your parent or guardian must sign):

\_\_\_\_\_ b. Date: \_\_\_\_\_

c. Print name: \_\_\_\_\_

d. **Note:** Please be sure to add [info@youthworks.ny.gov](mailto:info@youthworks.ny.gov) to your list of email contacts to ensure you receive your certificate by email.