



MARLBOROUGH SUMMER JOBS PROGRAM 2015

Youth Employment Application



APPLICANT INFORMATION: FOR YOUTH 16+ MARLBOROUGH RESIDENT: MUST BE A GRADUATING SENIOR OR ENTERING THEIR JUNIOR OR SENIOR YEAR OF HIGH SCHOOL						
How did you hear about Marlborough Summer Jobs Program?						
Date		Name				
Age		DOB				
Street Address				Apartment/Unit #		
City		State		ZIP		
Phone		E-mail Address				
Social Security No.						
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>						
Are you currently in High School or Graduating this year? YES <input type="checkbox"/> NO <input type="checkbox"/>						
Sex Male <input type="checkbox"/> Female <input type="checkbox"/>						
Ethnicity	White <input type="checkbox"/>	Brazilian <input type="checkbox"/>	Black <input type="checkbox"/>	Hispanic <input type="checkbox"/>	Asian <input type="checkbox"/>	Mixed-Race <input type="checkbox"/>
Other <input type="checkbox"/>						
Transportation I own a vehicle <input type="checkbox"/> I do not own a vehicle but have access to public transportation <input type="checkbox"/>						
Current Living Status		Alone <input type="checkbox"/>		With Family <input type="checkbox"/>		How many people do you live with
Emergency Contact Information:			Name		Relationship to you	
Cell			Email			
Please check all that apply to you (this information will not prevent you from a summer job with us)						
Limited English Speaking	Disabled	Pregnant/Parenting	Runaway/Homeless	Foster Child		
YES <input type="checkbox"/>	YES <input type="checkbox"/>	YES <input type="checkbox"/>	YES <input type="checkbox"/>	YES <input type="checkbox"/>		
DISCLAIMER AND SIGNATURE – IF OVER AGE 18						
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
Signature					Date	
DISCLAIMER AND SIGNATURE OF PARENT/GUARDIAN IF UNDER AGE 18						
I certify that these answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in the release of the said youth.						
Signature					Date	

The information you provide in this form will be used to assess your eligibility for the Marlborough Summer Jobs program as well as allow us to provide you with the appropriate services. Your personal information will not be shared with anyone outside of Partnerships for a Skilled Workforce, Inc. or your employer.

**Please submit this application either: via email – dboudreau@pswinc.org
or Via fax – 508-281-6911
or send to PSW, Inc. 420 Lakeside Avenue 3rd floor, Marlborough, MA 01752**

DEADLINE FOR APPLICATION IS FRIDAY, MAY 29, 2015