

Participant ID#

\_\_\_\_\_



**Application**

Please write clearly in blue or black ink. You will be asked to provide supporting documentation along with your application; you will not be accepted into the program without it. Please do not hesitate to ask for help if you need any.

Date \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Middle Name \_\_\_\_\_ Nick Name \_\_\_\_\_

Address \_\_\_\_\_

Apartment/Floor \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth (01/01/1990) \_\_\_\_\_

Home Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Alternate Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Name of Alternate Contact \_\_\_\_\_

Email \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Sex:  Male  Female  Other

**In each section, please check all appropriate boxes.**

Do you reside in low income/subsidized housing?  Yes  No

Do you receive TRA?  Yes  No

Household Income/Composition:

- Less than \$5,000
- \$5,000 - \$10,000
- \$10,000-\$20,000
- \$20,000 -\$30,000
- \$30,000- \$40,000

- \$40,000-\$50,000
- More than \$50,000

Number of Adults in the home \_\_\_\_\_

Number of Children in the home \_\_\_\_\_

Provide Name, age & relationship to those living in your home.

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

If you have children, please list Name, Gender and Age.

Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Who first informed/ suggested you to YouthBuild? (Check all that apply & provide a name)

- YouthBuild Graduate \_\_\_\_\_  Friend/Family member \_\_\_\_\_
- Guidance Counselor \_\_\_\_\_  Parole/Probation officer/ Judge \_\_\_\_\_
- Truant officer \_\_\_\_\_  Social Media/Website \_\_\_\_\_
- Other \_\_\_\_\_

**Education**

GED  Yes  No

High School Diploma  Yes  No (if not, what is the highest grade completed) \_\_\_\_\_

IEP (Individual Evaluation Plan) or diagnosed with a learning disability  Yes  No

Last public/private school you attended \_\_\_\_\_

City, State \_\_\_\_\_

Number of years out of school \_\_\_\_\_ Number of credits completed \_\_\_\_\_

**Share Your Thoughts**

Express your opinions by answering the questions below with at least three sentences.

How are you currently helping and contributing to your community and what do you plan on contributing to the YouthBuild community?

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By signing below, I state that the information provided on this application is accurate to fullest extent of my knowledge. I understand that completion of this application does not guarantee admittance into a YouthBuild Newark program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date