

## Project YouthBuild



## **Enrollment Application** 635 NW 6 Street • Gainesville, FL 32601 www.projectyouthbuild.org

	The following	information is used to c	letermine eligibility	and will be kept confident	ial. <mark>Complete in PEN</mark>
Date: _					
Name:				🗆 She/Her 🗆 He/	'Him $\square$ They/Them $\square$ Other
Addre	ss:				
City: _			State:		Zip:
Home	Phone:		Cell Phone	e:	
Email	Address:				U.S. Citizen
Age: _	D.O.B.		Social S	Security Number:	/
FaceB	ook, Instagram, Sna	apChat Name(s):			
Have v	you registered for t	the Selective Service? (	Male applicants ove	r the age of 18) 🔲 Yes 🏾	□ No □ Not Applicable
	ou of Hispanic or La			☐ Not Specified	
	mark all that appl	· ·		•	
ricuse	☐ Native North	<u></u>	Iawaiian Native or I	Pacific Islander 🔲 Asia	an 🔲 White
	☐ Black or Afri	can American 🔲 N	lot Specified		
Please	mark <u>all</u> fields tha	t apply:			
	☐ Migrant You	th 🗆 Low-inco	me Family	☐ Youth in Foster Care	☐ High School Dropout
	☐ Youth Offend	der 🔲 Child of Ii	ncarcerated Parent	☐ Adult Offender	☐ SNAP
	☐ Social Securi	ity Disability Insurance	e (SSDI)	☐ Supplemental Securi	ty Income (SSI)
	☐ Temporary A	Assistance to Needy Fa	milies (TANF)	☐ Unemployment	$\square$ Subsidized Housing
	☐ Other:				
Please	e list your emerge	ency contacts, numbe	rs should be differ	ent from your home nu	mbers:
Emerg	gency Contact 1:				
		Name	Relation	nship	Phone
Emerg	gency Contact 2:				
		Name	Relatio	nship	Phone

## **EDUCATIONAL BACKGROUND**

Do you have a High School Diploma?	Ž	∐ No
WORK HICT	ODV	
WORK HIST	_	_
Are you currently working?	Is your job?  Part-time	☐ Full-time
What is your current hourly wage? Average number	er of hours worked per week?	
Current Work Schedule:		
Name of Business		
CRIMINAL BACK Please answer this section HONESTLY—we are required to student and staff. If you are dishonest on this sec	complete Level II Background S	
Have you ever been <u>arrested, convicted or held in police custod</u> If yes, please describe		s □ No
Are you on probation, parole, or involved with corrections?	☐ Yes	
If yes, probation/parole officer	Phone # our probation and upcoming co	ourt dates.
ADDITIONAL INFO	RMATION	
Do you have a driver's permit or driver's license?	☐ Yes	s 🗆 No
Do you have a learners permit or driver's license?	☐ Yes	s 🗆 No
If accepted will you consistently attend Monday through Friday 8:3	0-3:45?	s 🗆 No
Explain how you will arrive and depart each day from Project Yout	hBuild? (ex. Drop off by friend, R	TS, bike, etc.)
What is your current living status (select any that apply)?		
$\square$ Living with family $\square$ Living alone $\square$ Living	ng with friends $\Box$ Living in a h	nouseless shelter
$\square$ Living in a halfway house $\square$ Houseless $\square$ Other	er:	
Are you a parent?   Yes   No If yes, how many children do you	have and what are their age(s): _	
If you are parent, are you interested in our parenting program? $\Box$	Yes 🗆 No	

## The following list of required documents MUST be turned in with your application.

	Copy of Birth Certificate				
	Copy of Driver's License/State ID—both front and back				
	Copy of Signed Social Security Card				
	Copy of Medicaid Card/Insurance Card—both front and back				
	Project YouthBuild Health Form				
	Project YouthBuild Parent/Guardian Release (If applicant is under 18 years of age)				
	Verification of <a href="https://example.com">household</a> income (e.g. pay stubs, tax forms, food stamp acceptance forms)				
	Official <b>UNOPENED</b> copy of High School Transcripts (Including IEP paperwork)				
Applica	nt Signature Date:				
Parent/Guardian Signature: Date:					
	mas participation with Mental Toughness offenderon, a four day evendy				
Parent <sub>/</sub>	Guardian Printed Name:				
Parent <sub>/</sub>					
Parent <sub>/</sub>	'Guardian Printed Name:				
Parent,	Guardian Printed Name:  How do I submit my application?				
Parent <i>j</i>	Guardian Printed Name:				