



Please return this completed application during your scheduled appointment time. Make sure you have the following documents with you: Birth Certificate, Driver's License/State ID, Social Security Card, Insurance Card/Medicaid Card, Verification of Household Income (pay stubs, tax forms etc.), official UNOPENED copy of HS Transcript (including IEP paperwork).

If you need assistance with this application, please contact us directly at 845-458-1643.

Today's Date: _____

Name: _____ { } Male { } Female

Address: _____ City _____ State NY Zip _____

Home Phone #: _____ Cell Phone #: _____

Email Address: _____

U.S Citizen { } Yes { } No Age: _____ Date of Birth _____

Social Security #: _____

Are you of Hispanic or Latinx Origin? { } Yes { } No { } Not Specified

What is your Race? { } American Indian or Alaskan { } Black or African American { } Hawaiian Native or Pacific Islander
 { } Asian { } White { } Two or more races

Do you have any documented disabilities? { } Yes { } No **If YES, please provide IEP or SSDI Paperwork**

Please mark all the fields that apply: { } Migrant Youth { } Low-Income Family { } Foster Care { } HS Dropout
 { } Adult Offender { } Youth Offender { } Child of an Incarcerated Parent { } Other _____

Emergency Contact Information:

Contact 1:

Name	Relationship	Phone
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Contact 2:

Name	Relationship	Phone
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Where did you hear about YouthBuild? _____

Do you know anyone that attended YouthBuild? _____

Educational Background:

Do you have a High School Diploma? { } Yes { } No

Do you have a High School Equivalency Diploma? { } Yes { } No

What is the last school you attended? _____

Date Attended? _____ Last Grade Completed? _____

Training and Work History:

Have you ever been in another training program? (ie. WIOA Summer Youth, Job Corps, YouthBuild etc.) { } Yes { } No

If YES, what program & location ? _____

Date you attended program _____ Did you complete the program? { } Yes { } No

Current Employment (if applicable):

Are you currently working? { } Yes { } No Is your job { } Part Time { } Full Time Hourly Wage? _____

Average # of hours work a week? _____

What is your current work schedule? Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____ Sunday _____

Name of Business: _____

Phone: _____ Your Position: _____

Supervisor's Name: _____ Can we call your supervisor? { } Yes { } No

Construction Experience:

Do you have any construction experience? { } Yes { } No

If YES, please describe projects you worked on or experience:

What about construction or the trades interest you?

Criminal Background

Please answer the following questions honestly. We do complete a Level II Background Screening on EACH participant. If you are dishonest, it may eliminate you from the selection process. **Please provide documentation of the terms of your probation and upcoming court dates.

Have you been arrested, convicted or held in police custody? { } Yes { } No

If YES, please describe:

Are you currently on probation, parole, or involved with corrections? { } Yes { } No

If YES, please provide probation/parole officer Name: _____

Phone #: _____

Additional Information

Do you have a Driver’s License or Learner’s Permit? { } Yes { } No Do you own a car? { } Yes { } No

Child Care:

Are you a parent? { } Yes { } No Will you need assistance with childcare? { } Yes { } No

Please provide the following for each child when you attend your interview: Child’s Birth Certificate, Proof of Residency of Orange County, NY and additional paperwork that will be needed by Tioranda Learning Center.

If YES name of child and age -

Program Schedule & Requirements:

If accepted into the program, will you be able to commit to attending Monday-Friday 8:30 am -4:30 pm? { } Yes { } No

Please share how you plan on arriving to the program daily? _____

Applicant Signature: _____ Date: _____

If under 18, need parental signature

Parent Name _____ Signature _____

Date: _____