



# University City Youth Summer Jobs Program Application

## **PERSONAL INFORMATION** – PLEASE PRINT IN BLACK INK

DATE: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
First Middle Last

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City State Zip

Are you eligible to work in the US?  Yes  No  
 If under 16, do you have a worker's permit?  Yes  No

Have you been convicted of or pleaded no contest to a felony within the last 5 years?  Yes  No

If yes, please explain: \_\_\_\_\_

## **POSITION & AVAILABILTY**

Position(s) you are interested in: \_\_\_\_\_

Attending Summer School?  Yes  No  
 Flexible Hours and Days?  Yes  No  
If you answered yes, leave box below blank

Hours Available:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
To:							
From:							

## **EDUCATION**

High School: \_\_\_\_\_

Current GPA: \_\_\_\_\_ Current Attendance %: \_\_\_\_\_

Are you in good standing with your school citizenship?  Yes  No

Have you received any out of school suspensions this school year?  Yes  No

If yes, please explain why: \_\_\_\_\_

Graduation or expected graduation date: \_\_\_\_\_

