



Summer Youth Employment Program (SYEP) Application

APPLICATION SUBMISSION DEADLINE - JUNE 15, 2023

Program Start and End Date **July 10, 2023 through August 2, 2023**

Work Schedule **Monday through Friday; 8:00 am - 5:00 pm**

Thank you for your interest in Columbia Housing's Summer Youth Program! Being a part of this program will allow participants the opportunity to explore their interests and career path, while developing workplace skills and engaging in learning experiences that help in developing social, civic, teamwork and leadership skills!

While Columbia Housing wishes that we can hire all that apply, we only have a limited number of positions available; so please understand that submission of an application, does not guarantee that you will be hired.

PERSONAL INFORMATION - please fill in each blank.

LAST NAME:

FIRST NAME:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

EMAIL ADDRESS:

PHONE NUMBER:

DATE OF BIRTH:

SCHOOL:

GRADE

10th Grade

11th Grade

12th Grade

Exiting 12th
Grade

PARENTAL INFORMATION - please fill in each blank.

PARENT'S/GUARDIAN'S
NAME

STREET ADDRESS:

CITY, STATE & ZIP

HOME PHONE #:

CELLULAR PHONE #

PARENT'S/GUARDIAN'S
EMAIL ADDRESS:

EMERGENCY CONTACT'S
NAME:

EMERGENCY
CONTACT'S
NUMBER:

RELATIONSHIP TO
APPLICANT:

PLEASE LIST
APPLICANT'S ALLERGIES
AND MEDICATIONS
NEEDED. IF NONE,
PLEASE PUT N/A IN BOX.

ARE THERE ANY OTHER
MEDICAL OR COGNITIVE
CONDITIONS WE NEED
TO BE AWARE OF?

Yes
No

IF YES, PLEASE
LIST HERE:

PLEASE CHECK ONE OF
THE FOLLOWING, IF
APPLICABLE:

I am a public housing resident of Columbia Housing

I have a Housing Choice Voucher (Section 8)

WORK EXPERIENCE

(i.e. chores, yard work, baby sitting, etc.) - Please include additional sheet, if needed

1. Company or person's
name

Telephone #

Supervisor's Name, if
different from above

Job Duties

2. Company or person's
name

Telephone #

Supervisor's Name, if
different from above

Job Duties

**IF YOU HAVE ANY
COMMUNITY
INVOLVEMENT,
VOLUNTEER WORK AND/
OR AWARDS, PLEASE
LIST HERE. IF NOT,
PLEASE PUT N/A.**

PLEASE ANSWER THE FOLLOWING QUESTIONS

What type of work are you
interested in doing at
Columbia Housing?

Administrative/Clerical
Maintenance/Grounds Helper
Either

What would you like to gain
from working at Columbia
Housing this summer?

What is an accomplishment
that you are most proud of?

What career are you
considering upon
graduation from high
school?

Are you currently involved
in any extracurricular
activities? If so, what?
Would the activity conflict
with your work hours of 8:00
am - 5:00 pm - Monday thru
Friday?

NOTE: this will not
automatically disqualify you
from consideration.

NOTE: Human Resources will need verification of your age. You must provide a copy of your birth
certificate, driver's license, medicaid card or some other form of identification that verifies age.

DISCLAIMER AND SIGNATURE

I hereby certify that the facts set forth in the above employment application are true and complete, to the best of my knowledge, and I authorize Columbia Housing (CH) to verify their accuracy and to obtain reference information on my character, work and/or attitude. I hereby release CH from any/all liability of whatever kind and nature which, at any time, could result from obtaining and/or making an employment decision based on such information.

I understand that, if employed, falsified statements of any kind and/or omissions of facts on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment at CH. However, I further understand that neither the policies, rules, regulations of employment, nor anything said during the interview process, shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or CH may terminate my employment at any time with or without notice or cause.

I hereby declare that this application's information is accurate and complete to the best of my knowledge. I understand that failure to complete this application, in its entirety, will result in the non-consideration of an incomplete application.

Applicant's signature

Date

Parent/Guardian's signature

Date