

WorkReady Philadelphia Participant Application

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|---|--|---|---|
| SECTION 1: ABOUT ME | | | |
| <i>Please print neatly. Indicate your responses to the questions with boxes using a (☑) or an (☒) mark. Please complete this application with as much information about you and your family that you can identify below. We encourage you to write N/A (Not Applicable) for questions that do not apply to you or your family situation.</i> | | | |
| First Name: _____ | | Last Name: _____ MI: _____ | |
| <i>WorkReady sometimes sends updates and appointments through email. Additionally, your email serves as your log-in to the online system.</i> | | | |
| Email Address: _____ | | | |
| Social Security #: _____ | | Age*: _____ | Date of Birth: ____/____/____ |
| Sex | Race | | Ethnicity |
| <input type="checkbox"/> Female <input type="checkbox"/> Male | <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> More than one race <input type="checkbox"/> Unknown or not reported | | <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino <input type="checkbox"/> Unknow or not reported |
| Address & Apt./ Floor: _____ | | Zip Code: 191____ | Phone Number: (____) _____-_____ |
| Parent/Guardian Contact Name: _____ | | Parent/Guardian Phone #: _____ <input type="checkbox"/> Home <input type="checkbox"/> Cell | Parent/Guardian's Relationship to you: _____ |
| Emergency Contact Name (If different): _____ | | Emergency Contact Phone #: _____ <input type="checkbox"/> Home <input type="checkbox"/> Cell | Emergency Contact's Relationship to you: _____ |
| (Males age 18-24) Are you registered with Selective Service? <input type="checkbox"/> YES <input type="checkbox"/> NO | | (Ages 14-17 ONLY) Do you have a work permit? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| SECTION 2: SCHOOL INFORMATION - Are you currently: <input type="checkbox"/> In School or <input type="checkbox"/> Out of School | | | |
| School Status: <input type="checkbox"/> In Middle School <input type="checkbox"/> In High School <input type="checkbox"/> Attained HS Diploma or Equivalent <input type="checkbox"/> In College or Post-secondary School | | | |
| What school are you attending or last attended? _____ | | | |
| What is your current grade level? <input type="checkbox"/> 6 th <input type="checkbox"/> 7 th <input type="checkbox"/> 8 th <input type="checkbox"/> 9 th <input type="checkbox"/> 10 th <input type="checkbox"/> 11 th <input type="checkbox"/> 12 th <input type="checkbox"/> College Freshman <input type="checkbox"/> College Sophomore <input type="checkbox"/> College Junior <input type="checkbox"/> College Senior <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate | | | |
| SECTION 3: BACKGROUND AND FAMILY INFORMATION | | | |
| Do you have any barriers(s) to education or employment? (Check all that applies) | | <input type="checkbox"/> No <input type="checkbox"/> Basic skills deficient <input type="checkbox"/> Court-involved or at risk of involvement <input type="checkbox"/> Experiencing Homelessness | |
| | | <input type="checkbox"/> English Language Learner <input type="checkbox"/> Have a disability <input type="checkbox"/> Not attended school in the last recent quarter <input type="checkbox"/> In or aging out of foster care <input type="checkbox"/> Migrant <input type="checkbox"/> Parenting <input type="checkbox"/> Pregnant <input type="checkbox"/> Runaway <input type="checkbox"/> School dropout or identified as at risk of dropping out <input type="checkbox"/> In need of additional assistance to enter/complete an education program <input type="checkbox"/> In need of additional assistance to secure and hold employment | |
| Are you currently employed? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Never | | Have you volunteered? <input type="checkbox"/> YES <input type="checkbox"/> No | |
| Have you participated in WorkReady/PYN-programs previously? <input type="checkbox"/> YES <input type="checkbox"/> NO | | How did you hear about this program? <input type="checkbox"/> Flyer <input type="checkbox"/> Provider/Partner <input type="checkbox"/> Social Media <input type="checkbox"/> SEPTA <input type="checkbox"/> WorkReady Website <input type="checkbox"/> Word of mouth | |
| Do you have a bank account? <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Both <input type="checkbox"/> No | | | |



on
behalf
of



SECTION 4: YOUR FAMILY INCOME - Please indicate family size and **personal** monthly income using the chart below. First, identify family size, then use a to indicate the income range for your family.

Note: Family size is only greater than 1 when you are a parent and/or legally married.

| Family Member/Size | Income | Income Range | Income Range | Income Range | If your family size is greater than 6, fill in your responses below: Number of family members/size: _____ Monthly Income: \$ _____ |
|--------------------|------------------------------|---|--|---|--|
| 1 | <input type="checkbox"/> \$0 | <input type="checkbox"/> \$1 - \$11,026 | <input type="checkbox"/> \$11,027 - \$28,529 | <input type="checkbox"/> More than \$28,529 | |
| 2 | <input type="checkbox"/> \$0 | <input type="checkbox"/> \$1 - \$18,071 | <input type="checkbox"/> \$18,072 - \$38,681 | <input type="checkbox"/> More than \$38,681 | |
| 3 | <input type="checkbox"/> \$0 | <input type="checkbox"/> \$1 - \$24,802 | <input type="checkbox"/> \$24,803 - \$48,833 | <input type="checkbox"/> More than \$48,833 | |
| 4 | <input type="checkbox"/> \$0 | <input type="checkbox"/> \$1 - \$30,617 | <input type="checkbox"/> \$30,618 - \$58,985 | <input type="checkbox"/> More than \$58,985 | |
| 5 | <input type="checkbox"/> \$0 | <input type="checkbox"/> \$1 - \$36,134 | <input type="checkbox"/> \$36,135 - \$69,137 | <input type="checkbox"/> More than \$69,137 | |
| 6 | <input type="checkbox"/> \$0 | <input type="checkbox"/> \$1 - \$42,154 | <input type="checkbox"/> \$42,154 - \$76,289 | <input type="checkbox"/> More than \$76,289 | |

Are you receiving any of the following? Cash Assistance SANP/Food Stamps Social Security

SECTION 5: MY INTERESTS (*Note: Placement in your area of interest is not guaranteed.*)

Think about these career pathways below and select **at least one and up to three** areas of interests below.

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Agriculture and Environmental Services | <input type="checkbox"/> Automotive Technology | <input type="checkbox"/> Healthcare, Life Science and Social Assistance | <input type="checkbox"/> Professional and Technical Services |
| <input type="checkbox"/> Architecture, Construction and Engineering | <input type="checkbox"/> Communications and Media | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Arts, Entertainment and Recreation | <input type="checkbox"/> Community Development and Support | <input type="checkbox"/> Information Technology | <input type="checkbox"/> Retail Trade |
| | <input type="checkbox"/> Educational Services | <input type="checkbox"/> Law and Justice | <input type="checkbox"/> Transportation and Logistics |
| | <input type="checkbox"/> Finance and Insurance | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Utilities |
| | | <input type="checkbox"/> Municipal Services | |

SECTION 6: PAYMENT OPTION (Please read below and check one of the following options):

There are different ways that wages can be distributed. WorkReady Summer participants can receive their wages either through a paper paycheck or a debit card.

The benefits to having an issued debit card include:

- Wages automatically loaded onto the card the morning of payday; paper checks may be delivered the following business day.
- You can skip the line at the bank to cash a paper check, as you will automatically have access to the funds on your debit card.
- Ability to make purchases or pay bills in-person, online or by phone everywhere that Visa debit cards are accepted.
- If a paper check is damaged, lost or stolen, it may take 48 hours or longer to be replaced.

Please indicate one of the following: I would like to be issued a debit card. I would like to be issued a paycheck.

Participant Signature _____ Date _____

Parent/Guardian Signature (If under the age of 18) _____ Date _____

Note: This application will not be accepted without a signed Application Signature Page.

