Gadsden County

Board of County Commissioners

9B East Jefferson Street, Quincy, Florida 32351, (850)875-8650, www.gadsdencountyfl.gov

2021 Gadsden Youth Initiative Program

Teens Between the ages of 17-19 Are Encouraged to Apply for the 2021 Gadsden Youth Initiative Program

Gadsden County announces its Youth Initiative Program, designed to allow students the opportunity to obtain work experience in a real-world environment. For seven (7) weeks, youth between the ages of 17 and 19 will be introduced to the workplace, gaining valuable employment skills and industry recognized credentials, all while earning a modest income.

Youth selected will earn \$8.65 per hour. The program begins Monday, June 28th and ends Thursday, August 19th.

Applications Accepted:

Monday, May 17th through Monday, June 14th

Applications can be obtained from the Gadsden County BOCC's website –
www.gadsdengov.net, any of the three branch libraries, at local county high schools, or
from the Gadsden County employment board located on the 1st floor of the
Edward Butler Governmental Complex Building
9B East Jefferson Street, Quincy, Florida

<u>Proof of Residency and a letter of reference from the youth's school of</u> attendance must be included when submitting the application.

Qualifications to Participate in the Program:

- Student Must be a Gadsden County Resident
- Must be between the ages of 17 19 on the date the program starts
- Currently Enrolled in a Gadsden County School
- Letter of Reference from their school highlighting:
 - Student Performance
 - Character
 - Work Ethic

Applications are to be submitted "ONLY" to the:

Gadsden County Board of County Commissioners
Administrator's Office
Location: Edward Butler Building
9B East Jefferson Street, 2nd Floor, Suite 201

Quincy, Florida
Applications may also be E-mailed to: HR@gadsdencountyfl.gov

For more information, please visit the County's website at: www.gadsdengov.net or contact Human Resources at (850) 875-8648 or (850) 627-5334.



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2021 Gadsden Youth Initiative Program **Employment Application**

Current Age [DOB	Current (Grade Level		
Municipality/Area where you live:	0		□ Midoo	C Outros	
	Greensboro Gret		☐ Midway	☐ Quincy	
St. John Robe	ertsville		Sawdust	Shallow	
Personal Information					
Last Name	Fii	st Name		MI	
Physical Address:					
Street Name & Number: _	-				
City:		Zip:			
Home Phone #:					
	Mailing Addres	S (If Different From Above	<u>e):</u>		
Street Name & Number or P.O. Box:					
City:		Zip:			
E-Mail Address:					
Name of Parent/Guardian	<mark>1</mark> :		Contact #:		
Are you a resident of Gadsden County?: Yes No					
This program is available to Gadsden County Residents Only					
Citizenship/Authorization					
The Gadsden County BOCC hires only United States citizens and lawfully authorized alien workers. If offered employment, you must provide proof of citizenship or authorization to work in the U.S. before you are hired.					
Are you a U.S. Citizen? Yes No If no, do you possess an I-151, an I-1551, or an I-94 card stamped "Employment Authorized"?					
☐ Yes, Card # ☐ No					
Education					
	Name o		Grade Le	evel Completed	
Elementary					
Middle					
High School					

Current or Previous Work History				
Current or Previous Employer: Job Title: Supervisor's Name: Address: Telephone #: Dates of Employment: From / / to / / Ending Hours Worked Per Week: Salary Beginning: /Ending				
Work Skills				
Certifications: Please List:				
Specific Areas of Expertise: 1. 2. 3. Other Skilled Areas(List any other relevant skills whether paid/unpaid.) 2. 3.				
Areas of Interest/Hobbies				
Please list below your interests and/or hobbies: 1 2 3				
CERTIFICATE OF APPLICANT I hereby certify that all statements made in this application and any attachments to it are true. I understand that any misstatement, misrepresentation or omission of fact may cause my application not to be considered; or, if I have been employed, may cause for my immediate dismissal. I authorize the Human Resources Office of Gadsden County BOCC to verify any information contained in this application and its attachments. I further authorize anyone having such information to release it. I further understand that I am applying for a position in the Gadsden County Youth Initiative Program. If I am selected for a position, I understand that I will be a participant in the Gadsden County Youth Initiative Program and not an employee of Gadsden County.				
 □ Checking this box indicates that you have read and agree to the Certificate of Applicant statement above. □ Checking this box indicates that you understand you will have to attend a mandatory orientation and training that will be scheduled for two weeks: June 28th through July 16th. □ Checking this box indicates that you agree to follow all rules, guidelines, and policies established and enacted for the Gadsden Youth Initiative Program. □ Checking this box indicates your application is complete and you understand that an incomplete application will not be Reviewed or considered for participation in the Gadsden Youth Initiative program. 				
STOP!! - Make sure you read and check the boxes above. Unchecked boxes indicates an incomplete application.				
Signature of Applicant: Date:				

Applications Without a Completed Proof Of Residency Form Will Not Be Accepted

Proof of Residency

It is required that a parent/guardian verify that a youth's address is within the County of Gadsden, Florida prior to submitting an application to participate in the Gadsden Youth Initiative Program. This form must be submitted along with two proofs of residency when submitting the employment application. Acceptable documents are listed below:

- ➤ Government Issued Photo ID such as Driver's License or ID Card
- ➤ Utility Bill (Cell Phone or Cable Bill will not be accepted as proof of residency)
- > Residential Lease or Proof of Property Ownership
- > Notarized Affidavit of Residency

Please complete the information below:

vided above is true and
Date
 Date
,

AFFIDAVIT OF RESIDENCY

I,		, the parent/guardian to
- (((Name), being duly sworn, do hereby
attest	st that:	
1.	 The youth mentioned above is a resident of in Gadsden County, Florida. 	the City of:,
2.	• ,	(Street Number & Name)
		(City & Zip)
3.	3. The youth has resided at the above address	since:
		cate Date Residency Began)
4.	4. The following people reside with the youth attest to the residency:	at the aforementioned address and can
	a. Name: Cont	act Phone #:
	Relationship to Youth:	
	b. Name: Cont	act Phone #:
	Relationship to Youth:	
	c. Name: Cont	act Phone #:
	Relationship to Youth:	
Sign	ignature of Parent/Guardian Completing Form	
	NOTARY ACKNOW	/LEDGEMENT
	TE OF FLORIDA UNTY OF	
The fo	foregoing affidavit was acknowledgement beforegoing, 2021, by	ore me this date of , who is personally known to me or
proved be the	, 2021, by red through satisfactory evidence of identificat ne person named and who signed this affidavit	ion which was to
Notary	ary Signature	
rrinte <i>Notar</i>	ted Name ary Seal/Stamp	-
	imission Expires:	_