**TRI-TOWN YOUTH SERVICES BUREAU**

JOB BANK/COMMUNITY SERVICE

APPLICATION

**YOUTH APPLICANTS FILL OUT THIS PORTION (ALSO DISCLAIMERS ON BACK)**

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GENDER \_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRADE \_\_\_\_

DATE OF BIRTH \_\_\_\_\_\_\_\_ AGE \_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL \_\_\_\_\_\_\_\_\_\_\_

Ethnicity: Family

\_\_\_Caucasian \_\_\_2 Birth/Adoptive Parents \_\_\_Joint Custody

\_\_\_African American \_\_\_Step & Birth Parent \_\_\_Other

\_\_\_Hispanic/Latina \_\_\_Single Parent Female \_\_\_Relative/Guardian

\_\_\_Asian \_\_\_Single Parent Male \_\_\_DCF

\_\_\_Native American \_\_\_Grandparent \_\_\_On Own

\_\_\_Multi-Racial \_\_\_Foster Parent

JOB INTERESTS

PREVIOUS EMPLOYMENT (starting with most recent)

REFERENCES (name, address, phone, relationship) (LIST TWO – individuals listed may not

 be relatives)

DAYS AND TIMES YOU ARE AVAILABLE FOR WORK

DO YOU HAVE TRANSPORTATION AVAILABLE?

Community Service is an opportunity to gain additional career experience, contribute to the welfare of others, and demonstrate a sense of commitment and responsibility. Please read through the skills checklist and mark in the appropriate column, those jobs that you are willing to do in exchange for pay, and jobs for which you are willing to volunteer.

**SKILLS CHECKLIST**

Community Service Employment Community Service Employment

\_\_\_ \_\_\_Animal Care \_\_\_ \_\_\_Mechanical Work

\_\_\_ \_\_\_Babysitting \_\_\_ \_\_\_Moving

\_\_\_ \_\_\_Boat Work \_\_\_ \_\_\_Painting

\_\_\_ \_\_\_Carpentry \_\_\_ \_\_\_Party Helper

\_\_\_ \_\_\_Cleaning \_\_\_ \_\_\_Snow Shoveling

\_\_\_ \_\_\_Companion \_\_\_ \_\_\_Tutoring

\_\_\_ \_\_\_Cooking \_\_\_ \_\_\_Typing/Computer Help

\_\_\_ \_\_\_Dishwashing \_\_\_ \_\_\_Yard Work

\_\_\_ \_\_\_Gardening \_\_\_ \_\_\_Housecleaning

**DISCLAIMER**

1. I realize that the “Tri-Town Youth Services Bureau” is providing potential “employers” with referrals and not recommendations, with regard to my youth application.

2. I understand that the “Tri-Town Youth Services Bureau” is not liable for any accident, injury, or problem situation that occurs during the scope of employment or community service.

3. I further understand that the employer has full responsibility for payment and conditions of employment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date Youth Applicant’s Signature

PARENT/GUARDIAN FILLS OUT THIS PORTION OF APPLICATION

**PARENT/GUARDIAN DISCLAIMER**

1. I am aware that my son/daughter, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, has signed up to

 participate in the “Tri-Town Youth Services Bureau Employment/Community Referral

 Program”.

2. My child has signed up to do \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 type(s) of work and this meets with my approval. I hereby authorize the Job Bank to furnish

 my son’s/daughter’s name and telephone number, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to prospective

 employers.

3. I realize that the “Tri-Town Youth Services Bureau” is providing potential employers with

 referrals and not recommendations with regard to its youth applicants; and that the “Tri-Town

 Youth Services Bureau” is not liable for any accident, injury, or problem situation that occurs

 during the scope of employment or community service. I further understand that the

 employer has full responsibility for payment and conditions of employment.

4. I acknowledge that I have received and read the attached Tri-Town’s Physical or Mental

 Abuse and Sexual Abuse and Sexual Molestation Prevention Policy. I understand the

 consequences in the event that I fail to uphold the policy.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date Parent’s/Guardian’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date Parent’s/Guardian’s Signature

*Please mail completed form to:*

**TRI-TOWN YOUTH SERVICES**

P.O. Box 897; Deep River, CT 06417

Or drop off at 56 High Street in Deep River or FAX to 860-526-3600

Thank you!

**PHYSICAL or MENTAL ABUSE AND**

**SEXUAL ABUSE AND SEXUAL MOLESTATION PREVENTION POLICY**

Tri-Town Youth Services Bureau, Inc. does not permit actual or threatened acts of physical or mental abuse, sexual abuse, sexual molestation or sexual misconduct (“prohibited conduct”) to occur in the workplace or at any activity sponsored by or related to it. In order to make this “zero-tolerance” policy clear to all employees, volunteers and staff members, we have adopted mandatory procedures that employees, volunteers, family members, board members, individuals and victims must follow when they reasonably suspect, learn of or witness prohibited conduct.

Abuse or molestation means each, every and all actual, threatened or alleged acts of physical or mental abuse, sexual abuse, sexual molestation or sexual misconduct performed by one person or by two or more persons acting together.

**Reporting Procedure**

All staff members who learn of, have a reasonable suspicion of prohibited conduct must immediately report it to the Executive Director. If the victim is an adult, abuse or neglect will be reported by this designee to the local or state police and/or Adult Protective Services (SPS) Agency. If a child is the victim of abuse or neglect the designee will report it to the local or state police and/or Child Abuse Agency. Appropriate family members of the victim must be notified immediately of suspected child abuse or neglect.

**Investigation & Follow Up**

We take allegations of prohibited conduct seriously. Once the allegation is reported we will promptly, thoroughly and impartially initiate an investigation to determine whether there is a reasonable basis to believe that the prohibited conduct has occurred and that it was committed by the target(s) of the investigation. The investigation may be undertaken by an internal team comprised of fellow employees or we may hire an independent third party. We will cooperate fully with any investigation conducted by law enforcement or regulatory agencies and we may refer the complaint and the result of our investigation to those agencies. We reserve the right to place the target(s) of the investigation on an involuntary leave of absence or reassigning that person to responsibilities that do not involve personal contact with individuals or students. To the fullest extent possible, but consistent with our legal obligation to report suspected prohibited to appropriate authorities, we will endeavor to keep the identity(ies) of the target(s) and the alleged victim(s) confidential.

If the investigation substantiates the allegation, our policy provides for disciplinary penalties, including but not limited to termination of the target’s relationship with our organization.