



Summer Youth Pre-Employment Interest Questionnaire

Department of Social Services

Division of Family Independence | Comprehensive Employment Division

B-5801 (4/2021)

Please answer the following questions. Return this form with the completed packet. Your answers will be used to determine the best fit for your summer job, if you are selected for the program.

| | | | |
|--|-------|---|------------------------------|
| Name of Parent/Guardian/Applicant (if Head of Household) | | Number of Members in Household | |
| Summer Youth Applicant Name | Email | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | Age |
| Gender Identity (Optional) <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> X <input type="checkbox"/> Transgender <input type="checkbox"/> Different Identity: _____ | | | |
| Race/Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Native American or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Other <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White | | | |
| Please check any that apply to you <input type="checkbox"/> Homeless <input type="checkbox"/> Runaway <input type="checkbox"/> Foster Care/ILP <input type="checkbox"/> Juvenile Justice System Involved (PINS, Probation, Youth Detention) | | | |
| Are you currently attending school or high school equivalency program? | | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| If yes, Name of School/Program: _____ | | | |
| Current grade in school: _____ | | | |
| Please check all that apply as of today <input type="checkbox"/> High School Graduate <input type="checkbox"/> Completed High School Equivalency Program <input type="checkbox"/> College Student | | | |
| Please indicate your plans for the Fall 2021 <input type="checkbox"/> Attend High School <input type="checkbox"/> Attend College <input type="checkbox"/> Enroll in Vocational Training Program <input type="checkbox"/> Enlist in the Military <input type="checkbox"/> Find a Job <input type="checkbox"/> Unsure | | | |
| Please check any that apply to you and specify if accommodations are needed. <input type="checkbox"/> Learning disabled, please explain: _____ <input type="checkbox"/> Physically disabled, please explain: _____ <input type="checkbox"/> Limited English, preferred language: _____ | | | |
| What area of employment are you interested in? Please check all that apply. <input type="checkbox"/> Arts & Recreation <input type="checkbox"/> Educational Services <input type="checkbox"/> Hospitality/Tourism <input type="checkbox"/> Camp <input type="checkbox"/> Financial Services <input type="checkbox"/> Legal Services <input type="checkbox"/> Community/Social Service <input type="checkbox"/> Government Agency <input type="checkbox"/> Manufacturing <input type="checkbox"/> Day Care <input type="checkbox"/> Healthcare/Medical <input type="checkbox"/> Maintenance/Custodial <input type="checkbox"/> Information & Technology <input type="checkbox"/> Media/Entertainment <input type="checkbox"/> Other _____ <input type="checkbox"/> Retail <input type="checkbox"/> Transportation | | | |
| What technology devices do you have access to use? <input type="checkbox"/> Personal Computer (PC) <input type="checkbox"/> Laptop <input type="checkbox"/> Tablet/iPad <input type="checkbox"/> Smart phone <input type="checkbox"/> None | | | |
| What previous work experience do you have? _____ | | | |
| What are some of your hobbies and interests? _____ | | | |
| What activities are you involved in outside of school? _____ | | | |
| Did you participate in a summer youth program in the past? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, where did you work? _____ | | | |
| Mode of Transportation <input type="checkbox"/> Bicycle <input type="checkbox"/> Walk <input type="checkbox"/> Other: _____ <input type="checkbox"/> Drive own vehicle <input type="checkbox"/> Get rides from people <input type="checkbox"/> Public transportation/Bus <input type="checkbox"/> Taxi/Ride-Sharing | | | |