

Great Lakes Bay Workforce Innovation and Opportunity Act Young Adult Application

Federal eligibility guidelines apply and if selected, all eligibility information, including gross family or household income, must be documented. Please be aware that positions are limited.

First Name:	Last Name
Street Address	City, State, Zip
Primary phone number:	
Alternate phone number:	Age: Date of birth:/
By entering your e-mail and Facebook address in the box across, you agree to allow the WIOA Young Adult program to send email advertisements in the form of job leads, education opportunities, and WIOA Young Adult related announcements via email and Facebook.	Facebook: Email:
Did you earn a High School Diploma or GED? Yes No	What is the last grade you have completed?
Are you receiving or Did you receive any disability assistance or attend special education classes? If yes, when	Are you working? Where: If not, last date or month you worked?

Number of people living in your home?	Are you low income? Yes or No
Who do you live with? (Parent, sister, grandparent, friends):	Do you or a family member receive Food stamps or a cash grant? Yes No
Are you homeless?	Have you been in trouble with the law?
Are you a runaway?	When?
Are you pregnant or a parent?	Are you or have you been in the foster care system?
	Yes or No - If yes, when?
Have you attended or are you planning to attend college?	What are your special skills and interests?
When:	
Signature:	_
	Date
(If under 18 years old)	
Parent Signature	
Eligibility Predetermination	
Staff Signature	Date