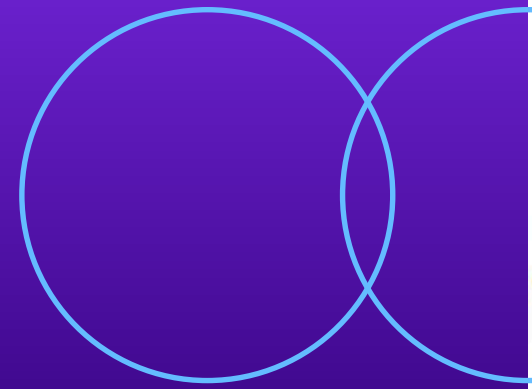
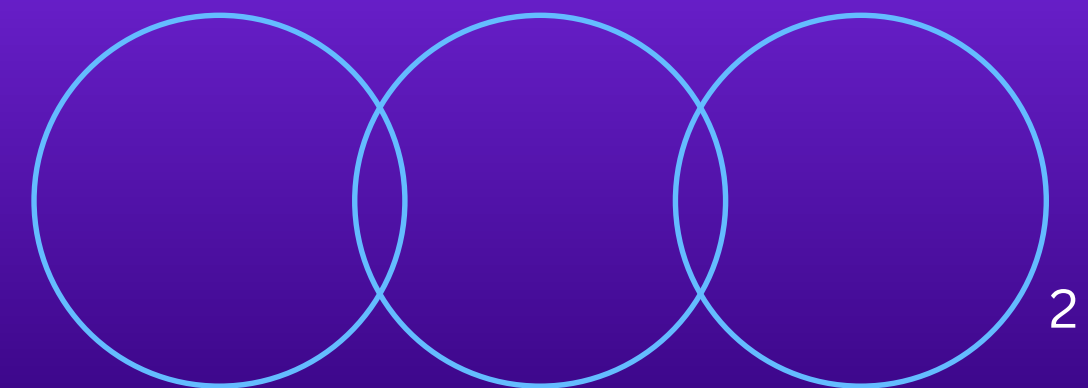


Youth Employment Program Training

Signature Report Form



Welcome to the ROC Youth Employment Network, home to the ROC Your Job Youth After School Employment Program, Summer of Opportunity Program, and the Summer Youth Employment Program.



How to complete the Signature Report

Welcome to RochesterWorks

A PATHWAY TO A SKILLED AND SUSTAINABLE WORKFORCE

My Plan

Show incomplete only [Print](#)

FORMS

Show All

	SYEP Application (Completed 02/02/2026)	Finalized	View
	Signature Report Form - to be completed by parent or guardian (Waiting on You)	Assigned	Complete Form

Once the form has been completed, download it and add the physical signature. Next, upload the file.

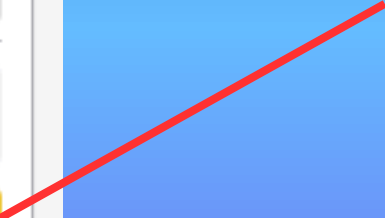
REQUESTED DOCUMENTS

Folder [-- Select --](#)

	Photo ID - School ID or New York's State Drivers or Non-Driver ID (Upload Required 02/02/2026)	Upload Required	Upload
	Social Security Card (Upload Required 02/02/2026)	Upload Required	Upload
	Work Permit (Upload Required 02/02/2026)	Upload Required	Upload
	Report Card (Upload Required 02/02/2026)	Upload Required	Upload
	Signature Report (Upload Required 02/02/2026)	Upload Required	Upload

Upload the signed Signature Report form.


Click on Complete Form



RochesterWorks

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- Events
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- Generate QR Code
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- Contact Request

 **Signature Report Form - to be completed by parent or guardian**

Section 1: For Student

* Do you receive public assistance?

Yes

No

If you answer
yes, you must
provide the
appropriate
Case #

 **Signature Report Form - to be completed by parent or guardian**

Section 2: For Families on Public Assistance

Please enter the appropriate case number(s) for receiving benefits.

Family Assistance/Safety Net Case #


HEAP Case #

Medicaid Case #

SNAP Case #

SSI Case #

If you answer no, you must provide the Annual Household Income and Size of household

 Signature Report Form - to be completed by parent or guardian

Section 1: For Student

* Do you receive public assistance?

Yes

No

 Signature Report Form - to be completed by parent or guardian

Section 3: For Families not on Public Assistance

List all sources of gross income, including wages, social security benefits, public assistance benefits, child support, alimony, etc. received and any other recurring income any other family member who is under 18 years of age (or 18 and in secondary school) but must include any unearned income.

* Annual Household Income (\$) (Including yourself):

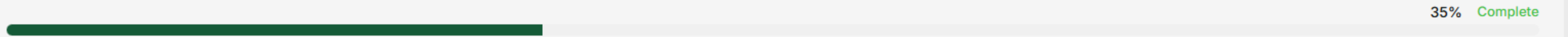
* Size of household (Including yourself)

☰ COLLAPSE MENU <

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✍️ **Signature Report Form - to be completed by parent or guardian**

← Restart



Based on your household income and family size, you fall below 200% of the Federal Poverty Guidelines (FPG).

Save and Close

Next

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Signature Report Form - to be completed by parent or guardian

← Restart

42% Complete

Household Income Details

Name	Income source: <small>Note: i.e.: Wages, social security etc.</small>	Amount	Received
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yearly <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yearly <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly

You do not need to include any earned income (wages) received by you or any other family member who is under 18 years of age (or 18 and in secondary school) but must include any unearned income.

Signature Report Form - to be completed by parent or guardian

Section 4: Citizen / Non-Citizen Status

Note: Citizen / Non-Citizens Status

Are you a United States citizen?

Yes

No

Signature Report Form - to be completed by parent or guardian

If you (the youth applicant) are not a United States citizen, look at the "[Immigration status list](#)" on pages 5 and 6 and tell us wh

Immigration status (# 1 through 15) that applies:

INS Form Number:

Alien Number:

Date of Entry into the United States:

* Do you live within the limits of the City of Rochester?

Yes

No

* Is the applicant a foster child?

Yes No

* Does your child have an Individual Education Plan (IEP)?

Note: *Access to the I.E.P. will be confidential and used to assist in making the most appropriate referral.

Yes

No

If you answer "No", you must complete Immigration Status, INS Form Number and Alien Number

 **Signature Report Form - to be completed by parent or guardian**

I have completed and truthfully answered all the questions on the application. I understand that I may be terminated from the

Test, Aiden

Parent/Guardian:

The individual signing this application may be asked to prove any or all of your statements. If we ask you to do this, we will tell you how to prove it. We are asking for Social Security number(s) because any person applying for or receiving federal TANF services must give us his or her Social Security number(s) as required by federal regulations (45 CFR 264.10). We may use Social Security number(s) to do computer matches with other programs to prove you are receiving TANF services and your alien status.

If you disagree with any decisions we make regarding your eligibility to receive TANF services, you may have your certification reviewed by a person other than the person who made the decision. I give permission for my child to participate in the TANF Youth Employment Program – RocYourJob and for the program to send and or receive information to and from other agencies and to use placement data if necessary. Additionally, I agree to allow for the recorded image or for the voice of my child to be used for promotional materials and for other purposes. By signing this, I am swearing, under penalty of perjury, that all the above statements are true and correct to the best of my knowledge.

*** Parent/Guardian Name**

Test, Father

Write in the name of Parent?Guardian

*** Relationship to Applicant**

Parent


Write in Relationship to Applicant

Click next to add Parent/Guardian

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COLLAPSE MENU <

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 **Signature Report Form - to be completed by parent or guardian** ← Restart

97% Complete

Add Parent/Guardian

Save and Close **Next**

Click Add Signer

RochesterWorks

COLLAPSE MENU <

- Home
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Please click on the + Add Parent/Guardian button to add your Parents/Guardians details.

Signer

Add Signer

First Name ↕

Last Name ↕



No Related Person

→ Next

Complete Search to see if Parent/Guardian email exists.

Please click on the + Add Parent/Guardian button to add your Parents/Guardians details.

Search Criteria

Back To List

First Name

Phone

Last Name

Email

Include Archived

Clear

Search

Search Results

Add Selected

Add New

Please enter your search parameters.

Next

COLLAPSE MENU

- Home
- My Plan
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- My Profile
- Events
- Jobs
- Generate QR Code
- Calendar
- Contact Request

Please click on the + Add Parent/Guardian button to add your Parents/Guardians details.

Search Criteria

Back To List

First Name	Phone
<input type="text"/>	<input type="text"/>
Last Name	Email
<input type="text"/>	<input type="text" value="Perfectingholiness@ghrefuge.org"/>

Include Archived

Clear

Search

Search Results

Add Selected Add New

<input type="checkbox"/>	First Name	Last Name	Work phone	E-Mail	Count: 1
<input checked="" type="checkbox"/>	Theodore	Test		perfectingholiness@ghrefuge.org	Select

1

Next

Select and then "Add Selected"

- Home
- My Plan
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- Activity Timesheets
- My Profile
- Events
- Jobs
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- Contact Request

If the Parent/Guardian email does not exist. Complete the form.

Please click on the + Add Parent/Guardian button to add your Parents/Guardians details.

⊕ - Indicates a required field

First Name ⊕	Work phone	Zip code
<input type="text"/>	<input type="text"/> + ext	<input type="text"/>
Last Name ⊕	Suffix	Home phone
<input type="text"/>	-- Select --	<input type="text"/>
E-Mail ⊕	Address	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>
Cell phone	Address 2	
<input type="text"/>	<input type="text"/>	

Cancel

1. Click "SAVE"

2. Then click on "Home"

RochesterWorks

☰ COLLAPSE MENU <

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📁 My Documents

Activity Timesheets

👤 My Profile

📅 Events

📁 Jobs

📄 Generate QR Code

📅 Calendar

📌 Contact Request

My Plan Show incomplete only Print

FORMS Show All

✓ RYEN Application <small>(Completed 03/31/2026)</small>	Finalized	View
🕒 Signature Report Form - to be completed by parent or guardian <small>(Waiting on Staff Member for Completion)</small>	97% Complete	View

Click on View

COLLAPSE MENU <

Home

My Plan

My Documents

Activity Timesheets

My Profile

Events

Jobs

Generate QR Code

Calendar

Contact Request

Click Sign

Form: Signature Report Form - to be completed by parent or guardian

Review Answers Edit Answers Close

Sign Outputs

Once one of the outputs in this list has been signed, form answers will become locked and no longer editable.

Output	Status	Actions
Signature Report	Waiting on You	Sign

Continue

Click here to complete the next steps

Select Sign

Form: Signature Report Form - to be completed by parent or guardian

OUTPUT

Signature Report

02 >

Review Answers Close

Edit Print Page Print Output Only X

SIGNATURE REPORT

CONFIDENTIAL INFORMATION – will not be shared outside the program

Section 1: Student Name: Thaddeus Test

The information on this form is necessary to determine whether or not federal Temporary Assistance for Needy Families (TANF) funds may be used to provide services to you. This application form may be used by an applicant for services who is under 21 years of age. If you receive public assistance, proceed to section 2. If you do not receive public assistance, continue to section 3. Please note: Proof of Income may be requested. Be sure to complete all required sections. Missing information will delay your application.

Section 2: For Families on Public Assistance

Please enter the appropriate case number(s) for receiving benefits.

Family Assistance/Safety Net: Case #

Medicaid: Case # HEAP: Case #

SSI: Case # SNAP: Case #

If you do not receive public assistance, please move forward to Section 3. If you receive public assistance, please move forward to Section 4.

Section 3: For Families not on Public Assistance

Include the gross income (income before taxes and deductions) of each family member who lives with you. Family members include your mother, father, stepmother, stepfather, any brothers or sisters (including half-siblings) who are under 18 years of age (or 18 and in secondary school) and these siblings' parents. If you have a child of your own, you should include that child, any brothers or sisters of the child, and the child's parent. You should not include any of these people if they do not live with you. You should not include other family members such as grandparents, uncles or aunts. If you are married, you should include your spouse, but do not need to include your parents or siblings.

List all sources of gross income, including wages, social security benefits, public assistance benefits, child support, alimony, etc. received and any other recurring income of a family member. You do not need to include any earned income (wages) received by you or any other family member who is under 18 years of age (or 18 and in secondary school) but must include any unearned income.

Size of household (including Yourself) 4 Annual Household Income (\$): 30,000

	Name	Income Source Wages, Social Security, etc.	Amount	Received			
				Yearly	Monthly	Weekly	Bi-Week
1	Dad		30,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signatures

Sign

No one has signed this output yet

Signatures are needed from the following:

- 1. Student
- 2. Signer

RochesterWorks

COLLAPSE MENU

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Signature

Please sign using your mouse/stylus/finger

⚠ This is considered equivalent to signing a paper form.

⚠ Once this has been signed, form answers will become locked and no longer editable.

Please sign.

I confirm that by signing this, my answers will become **locked** and I will not be able to edit my responses.

Cancel Done

Sign the form,
click the “I confirm”
then “Done”

HEAP: Case #

Thanks for completing the form.

Close

Notify Parent / Guardian to check their email
Remember to check the Spam Folder/Junk Mail

Notify Parent / Guardian to check their email

Remember to check the Spam Folder/Junk Mail

JUNK MAIL Usage 4% of 5120

Compose Get Mail Search Mail Address Book Settings Log Out

Mark As Unread Mark As Read Block Delete Mark as Not Spam Move message(s) to: OK << Prev Next >>

	From	Subject	Date	Size
<input type="checkbox"/>	ROC Youth Employment Network	<u>Communication to parent/guardian to alert them of their required signatures on Student documents.</u>	3/31/26 5:01 PM	9 KB
<input type="checkbox"/>	ROC Youth Employment Network	Communication to parent/guardian to alert them of their required signatures on Student documents.	3/30/26 7:31 PM	9 KB
<input type="checkbox"/>	ROC Youth Employment Network	<u>Communication to parent/guardian to alert them of their required signatures on Student documents.</u>	3/30/26 12:37 PM	9 KB
<input type="checkbox"/>	ROC Youth Employment Network	<u>Communication to parent/guardian to alert them of their required signatures on Student documents.</u>	3/30/26 12:35 PM	9 KB

Click on the link

READ MESSAGE

Compose Get Mail Search Mail Address Book Settings Log Out

Reply Reply All Forward View Header Delete Report SPAM Printable View Move to: ▾

From: ROC Youth Employment Network <RYEN@MyOneFlow.com>

To: perfectingholiness@ghrefuge.org

Cc:

Subject: Communication to parent/guardian to alert them of their required signatures on Student documents.

Priority: Normal **Date:** Tuesday, March 31, 2026 5:01 PM **Size:** 9 KB

Dear Theodore,
You have been designated as a Parent/Guardian to sign documents for the participant. As such, there is a form in our myOneFlow system that requires your completion and signature. Please click on the link below to review and sign.
<https://App.myoneflow.com/RochesterWorks/oneflow/rSignerForm.aspx?GUID=ecd31b55-4a47-497e-ac65-657872114c3a>
Thank you,

Click "Sign"

OUTPUT

Signature Report

1 2 >

Print Page Print Output Only X

Signatures

Sign



SIGNATURE REPORT

SIGNATURE REPORT

CONFIDENTIAL INFORMATION – will not be shared outside the program

Section 1: Student Name: Thaddeus Test

The information on this form is necessary to determine whether or not federal Temporary Assistance for Needy Families (TANF) funds may be used to provide services to you. This application form may be used by an applicant for services who is under 21 years of age.

If you receive public assistance, proceed to section 2. If you do not receive public assistance, continue to section 3.

Signed By	Signed On
Thaddeus Test	03/31/2026 05:01 PM

Signatures are needed from the following:
1. Signer

Signature

Please sign using your mouse/stylus/finger

⚠ This is considered equivalent to signing a paper form.

⚠ Once this has been signed, form answers will become locked and no longer editable.

Please sign. ↻

Cancel Done

Sign the form,
then click "Done"

erWe ⓘ

Thanks for completing the form.

COM

Name

Close

form is necessary to determine whether or not federal Temporary Assistance for Needy Families (TANF) funds services to you. This application form may be used by an applicant for services who is under 21 years of age. stance, proceed to section 2. If you do not receive public assistance, continue to section 3.

The applicant can now login to the account for status updates.

The screenshot displays the RochesterWorks 'Signature Report' interface. At the top left is a 'Login' button. Below it, the 'OUTPUT' section is titled 'Signature Report'. On the right side of this section are 'Print Page' and 'Print Output Only' buttons. A navigation indicator shows '02' with a right arrow. The main content area contains a preview of the signature report form, which includes the RochesterWorks logo, the title 'SIGNATURE REPORT', a confidentiality notice, and a section for 'Student Name: Thaddeus Test'. A red warning message is visible at the bottom of the form preview. To the right of the form preview is a 'Signatures' section with a 'Sign' button and an information icon. Below this is a table listing the signatures.

Signed By	Signed On
Theodore Test	04/01/2026 10:26 AM
Thaddeus Test	03/31/2026 05:01 PM

The form shows both signatures.