RochesterWorks
Youth Employment Programs
Request Form

Please complete this form and return to RochesterWorks. All fields require information, and a formal job description must be submitted with the request form. RochesterWorks is responsible for pre-screening and placing youth workers in locations of best fit. Please remember that we cannot guarantee to fill each opening and that intern placement is dependent on the number of requests received and the best fit for both the youth intern and worksite.

Program of Interest:
Summer Youth Employment Program ☐ Roc Your Job In- School Employment Program ☐ Both Programs ☐

Company Information

DBA: _____ FEIN: _____

Address: _____ Business Hours: _____

_____ _____

Type of Business: _____

Contact Information

Primary Contact: _____ Title: _____

Phone: _____ Fax: _____ Preferred Contact: ☐ E-mail

E-mail: _____ ☐ Phone

Please provide contact information for at least one other staff member who will assist with the program regularly or who can be reached if primary contact is out on leave, for vacation, etc.

Secondary Contact: _____ Title: _____

Phone: _____ Fax: _____ Preferred Contact: ☐ E-mail

E-mail: _____ ☐ Phone

Who will oversee the weekly time submission for each intern: ☐ Primary Contact ☐ Secondary Contact

Worker Request

Can you provide 15 hours of work while school is in session, **and/or** 20 hours in the summer? ☐ YES ☐ NO
Can you accommodate a youth worker for up to 40 hours per week over the summer? ☐ YES ☐ NO

Total Number of Youth Interns Requested: ☐

Can you accommodate youth who are in summer school? ☐ YES ☐ NO

Youth Intern Job Title(s)	Intern Hour Range	# Of Openings	Requires Age 18+
			☐ YES ☐ NO
			☐ YES ☐ NO
			☐ YES ☐ NO

Will you provide a worksite mentor for each youth? ☐ YES ☐ NO

Will you train young people in specific job tasks if needed? ☐ YES ☐ NO

Can your organization hire a youth intern beyond the summer program, if appropriate? ☐ YES ☐ NO

Does your organization require any additional screening of youth interns, including but not limited to drug screening, background checks, medical screening, vaccination records, or fingerprinting? **Please indicate if your onboarding process will necessitate additional time due to additional requirements (e.g. medical paperwork, background clearance).*

☐ YES
☐ NO

If YES, please explain: _____

_____

_____

Costs related to additional screening methods WILL NOT be covered by RochesterWorks or expected of youth interns*

Formal job descriptions must be submitted for each position your business is interested in filling. It should include detailed information about the position the intern will occupy, job duties and any traits/skills a youth should possess that will contribute to their success in the position.

Additional Information: **Orientation sessions will be held to allow the intern to meet with worksite representatives, discuss schedules and expectations of the worksite, and receive payroll orientation.**

Completed Requests Should Be E-mailed, Faxed, or Mailed to:

Delia Smith

Youth Programs Supervisor, RochesterWorks

100 College Avenue (Suite 200), Rochester, NY 14607

Phone: 585-258-3500 ext. 5232 Fax: 585-232-3727

dsmith@rochesterworks.org

RochesterWorks is an equal opportunity program. Auxiliary aids and services are available upon request to individuals with disabilities.