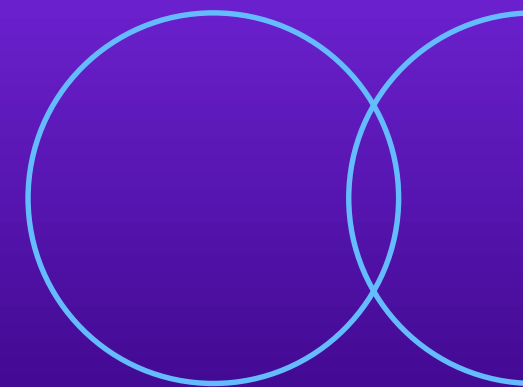
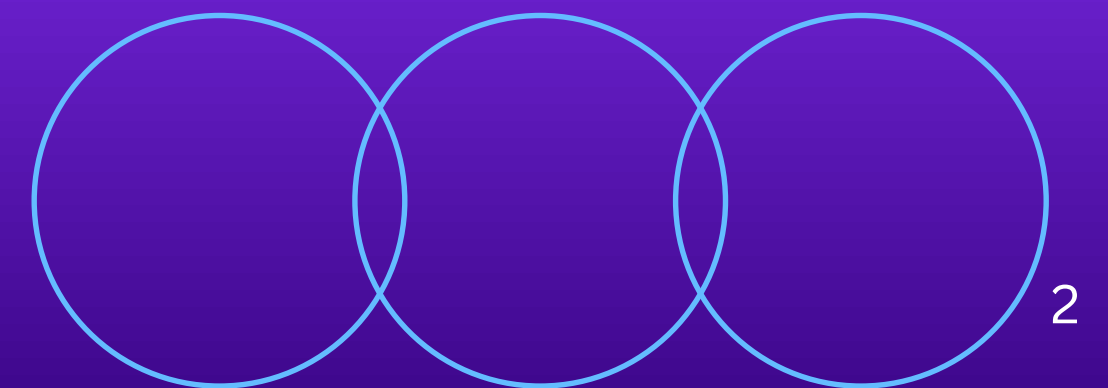


Youth Employment Program Training Signature Report Form



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



☰

COLLAPSE MENU

◀

🏠

Home

📅

My Plan

📁

My Documents

Activity Timesheets

👤

My Profile

📅

Events

🏢

Jobs

📄

Generate QR Code

📅

Calendar

📧

Contact Request

Welcome to RochesterWorks

A PATHWAY TO A SKILLED AND SUSTAINABLE WORKFORCE

My Plan

Show incomplete only ☒

Print

Forms

Show All

🕒

Parent Signature Report Form - to be completed by parent or guardian
(Waiting on Staff Member for Completion)

● Waiting on Staff Member

View

Please have your parent/guardian check their email to sign this form

✅

RYEN Application
(Completed 09/24/2026)

● Finalized

View

Requested Documents

Folder

-- Select --

📄

Photo ID - School ID or New York's State Drivers or Non-Driver ID
(Upload Required 04/01/2026)

● Upload Required

Upload

📄

Social Security Card
(Upload Required 04/01/2026)

● Upload Required

Upload

📄

Work Permit
(Upload Required 04/01/2026)

● Upload Required

Upload

📄

Report Card
(Upload Required 04/02/2026)

● Upload Required

Upload

Click on
View

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)

RochesterWorks

COLLAPSE MENU

Home

My Plan

My Documents

Activity Timesheets

My Profile

Events

Jobs

Generate QR Code

Calendar

Contact Request

Signature Report Form - to be completed by parent or guardian

Restart

35% Complete

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

Save and Close

Next

RochesterWorks

COLLAPSE MENU

Home

My Plan

My Documents

Activity Timesheets

My Profile

Events

Jobs

Generate QR Code

Calendar

Contact Request

Signature Report Form - to be completed by parent or guardian

Restart

42% Complete

Household Income Details

Name	Income source: Note: i.e.: Wages, social security etc.	Amount	Received
			☐ Yearly ☐ Monthly ☐ Weekly ☐ Bi-weekly
			☐ Yearly ☐ Monthly ☐ Weekly ☐ 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 program if I provide false information.

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 to prove 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 about my child's 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 the program to ask questions. 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

 RochesterWorks

COLLAPSE MENU

Home

My Plan

My Documents

Activity Timesheets

My Profile

Events

Jobs

Generate QR Code

Calendar

Contact Request

 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

 My Plan

 My Documents

Activity Timesheets

 My Profile

 Events

 Jobs

 Generate QR Code

 Calendar

 Contact Request

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

Parent/Guardian

Add Parent/Guardian

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

RochesterWorks

COLLAPSE MENU

Home

My Plan

My Documents

Activity Timesheets

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

First Name

Phone

Last Name

Email

Perfectingholiness@ghrefuge.org

Include Archived

Clear

Search

Back To List

Search Results

Add Selected

Add New

☐	First Name	Last Name	Work phone	E-Mail	Count: 1
☒	Theodore	Test		perfectingholiness@ghrefuge.org	Select

1

Next

Select and then “Add Selected”

13

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

RochesterWorks

COLLAPSE MENU

Home

My Plan

My Documents

Activity Timesheets

My Profile

Events

Jobs

Generate QR Code

Calendar

Contact Request

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

- Indicates a required field

First Name	Work phone	Zip code
	+ ext	
Last Name	Suffix	Home phone
	-- Select --	
E-Mail	Address	Relationship
Cell phone	Address 2	

Cancel Save

Next

1. Click "SAVE"

1. Then click on "Home"

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

RochesterWorks

COLLAPSE MENU

Home

My Plan

My Documents

Activity Timesheets

My Profile

Events

Jobs

Generate QR Code

Calendar

Contact Request

Select Sign

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

OUTPUT

Signature Report

02

RochesterWorks

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. 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 #

SSI: Case #

HEAP: 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	Amount	Received			
		Wages, Social Security, etc.		Yearly	Monthly	Weekly	Bi-Week
1	<u>Dad</u>		<u>30,000</u>	☐	☐	☐	☐
2				☐	☐	☐	☐
3				☐	☐	☐	☐
4				☐	☐	☐	☐
5				☐	☐	☐	☐
6				☐	☐	☐	☐
7				☐	☐	☐	☐

Review Answers

Close

Edit

Print Page

Print Output Only

X

Signatures

Sign

ⓘ

⋮



No one has signed this output yet

Signatures are needed from the following:

- 1. Student
- 2. Signer

RochesterWorks

COLLAPSE MENU

Home

My Plan

My Documents

Activity Timesheets

My Profile

Events

Jobs

Generate QR Code

Calendar

Contact Request

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

Income Source	Amount	Received
---------------	--------	----------

Click “Sign”

OUTPUT

Signature Report

1 2 >

 **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.

Print Page Print Output Only X

Signatures

Sign

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

Signatures are needed from the following:
1. Signer

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

Microsoft Office Ho... Clergy Shirts - Men ... Amazon.com - Onli... HP - See What's Hot HP Games Resources Imported From IE Frontier Mail Spectrum CATS - Login

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

	From	Subject	Date	Size
☐	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
☐	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
☐	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
☐	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,

Google Translate

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  RT

Thanks for completing the form.

Close

COM

Name

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.

Login

OUTPUT

Signature Report

1 2 >

Signatures

Print Page Print Output Only X

Sign Sign Info More

SIGNATURE REPORT

SIGNATURE REPORT	
<u>CONFIDENTIAL INFORMATION – will not be shared outside the program</u>	
Section 1: Student Name: <u>Thaddeus Test</u>	
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.	

The form shows both signatures.

How to complete the Signature Report

Click on
View to
verify both
signatures
are present

RochesterWorks

☰

COLLAPSE MENU

🏠

Home

📅

My Plan

📁

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
(Completed 09/24/2026)

Finalized

View

🕒

Parent Signature Report Form
(Waiting on Staff Member for Completion)

Waiting on Staff Member

View

Please have your parent/guardian check their email to sign this form

Requested Documents

Folder

-- Select --

📘

Photo ID - School ID or New York's State Drivers or Non-Driver ID
(Upload Required 09/24/2026)

Upload Required

Upload

📘

Social Security Card
(Upload Required 09/24/2026)

Upload Required

Upload

📘

Work Permit
(Upload Required 09/24/2026)

Upload Required

Upload

📘

Report Card
(Upload Required 09/24/2026)

Upload Required

Upload

23

How to complete the Signature Report

RochesterWorks

☰

COLLAPSE MENU

◀

🏠

Home

📅

My Plan

📁

My Documents

Activity Timesheets

👤

My Profile

📅

Events

📁

Jobs

📄

Generate QR Code

📅

Calendar

📧

Contact Request

Welcome to RochesterWorks

A PATHWAY TO A SKILLED AND SUSTAINABLE WORKFORCE

My Plan

Show incomplete only ☒

Print

Forms

Show All

- ✓

RYEN Application
(Completed 09/24/2026)

● Finalized

View
- ✓

Parent Signature Report Form
(Completed 09/24/2026)

● Completed

View

Please have your parent/guardian check their email to sign this form

Requested Documents

Folder

-- Select --

- i

Photo ID - School ID or New York's State Drivers or Non-Driver ID
(Upload Required 09/24/2026)

● Upload Required

Upload
- i

Social Security Card
(Upload Required 09/24/2026)

● Upload Required

Upload
- i

Work Permit
(Upload Required 09/24/2026)

● Upload Required

Upload
- i

Report Card
(Upload Required 09/24/2026)

● Upload Required

Upload

Completed