

GLASSROOTS

2019 City of Newark OneStop Summer Youth Employment Program GlassRoots' Youth Leadership Corps Application

DEADLINE: January 31, 2019

Return to Lisa Duggan, Program Director

Via email at lduggan@glassroots.org

Via fax at 973.353.9551

Mail or hand deliver to 10 Bleeker Street, Newark NJ 07102

PROGRAM INFORMATION

GlassRoots is happy to announce the 6th year of our **Youth Leadership Corps** program (known as YLC). The YLC's are a group of experienced students who will be trained as counselors/mentors in our **six-week summer work program**.

PROGRAM DATES: July 8th to August 16th, 2019

The YLC program meets 4 days, Monday through Thursday, four hours per day beginning at 10am.

- Start date: **Monday, July 8, 2019**
- **July 8 – July 19:** Two weeks training in all of GlassRoots' hot-glass studios as well as training in how to be a counselor and mentor.
- **July 22 to August 16:** Youth Leaders will serve as assistants for GlassRoots' summer camp classes and assist in GlassRoots' administrative offices. YLCs will cycle through the studios and will have an opportunity to participate in an open studio during select hours after workshops have concluded, in order to practice and gain proficiency in glass-art making.

IMPORTANT NOTE

- All applicants must complete both a GlassRoots' application as well as register separately with the City of Newark for the OneStop Summer Youth Employment Program. You may apply online at <https://application.newarkwep.org>.
- Please note you must be a resident of Newark in order to be paid by the Newark OneStop Summer Youth Employment Program. You may still apply to be in GlassRoots' Youth Leadership Corps but will not receive payment.
- Any student who has not worked at GlassRoots prior to this program will be called for an interview at GlassRoots.
- Completion of this form is no guarantee of acceptance.

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First Name: _____ Last Name: _____

Gender: M_ F_ Non-binary_

Date of birth (MM/DD/YY) ___/___/___ Current age: _____ Grade: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Student Cell: _____

Email: _____

Name of School: _____ Town School is located: _____

PLEASE NOTE: You must be a resident of Newark in order to be paid by the Newark OneStop Summer Youth Employment Program. IF you are not a resident of Newark, you may still apply to be in the Youth Leadership Corps but will not receive payment.

*Newark One Stop Program requires a GPA of 2.5 or higher in order to participate in the Summer Youth Employment Program; we cannot guarantee that the city will waive this requirement.

What is your current GPA*? _____

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Commitment Contract and Responsibilities

GlassRoots Participant Agreement:

I acknowledge that I will be working in an environment that is inherently dangerous. I further acknowledge that I will be engaging in activities that involve risks of personal injury and, therefore, require my full attention at all times. As such, I agree to follow all rules set out by the staff of GlassRoots and to exercise due care and caution for both myself and others at all times.

Student's Signature: _____ **Date:** _____

GlassRoots Parent/Guardian Agreement:

I recognize that working with glass involves risk of personal injury. I assume full responsibility for my child's safety in connection with these activities, and release GlassRoots and its officers, Board of Trustees, employees and agents from liability for injury related to these activities. I also acknowledge that GlassRoots is not responsible for the protection, care or insurance coverage for tools, work in progress or works of art in the event of damage or destruction, or for anything the child brings to class or leaves behind after departure.

I authorize GlassRoots to use photographs or other images of my child and their work for any purposes it finds appropriate, such as for publication, advertisement or exhibition, without charge or further permission.
Yes ___ No ___

It is GlassRoots' policy that cell phones and other technology (ear buds, ipods, etc) are strictly prohibited from classroom and studio workspaces as they are extremely distracting. In case of emergency, parents/guardians are asked to call the GlassRoots main # (973.353.9555) and your child will be contacted immediately. By signing below you agree to help support this policy.

I hereby specifically authorize my child's school to release information regarding my child's academic performance for the academic semesters preceding, during and immediately following his/her participation in any program at GlassRoots. I understand that this information will not be released to any outside party except when aggregated with that of other program participants.

I understand that we have expectations of our program participants and will therefore encourage my student to follow the rules and responsibilities set forth by GlassRoots. I understand that he or she may be terminated from the program if these are not followed.

I have carefully read this agreement and I understand and accept all terms and policies stated herein.

Parent/Guardian Signature: _____ **Date:** _____

Address (if different from student) _____

Cell number _____ Home Number _____

Parent/guardian email _____

Does your child have any allergies, medical problems or other special considerations? YES NO

HOUSEHOLD INCOME INFORMATION: CONFIDENTIAL

For a number of grant and funding opportunities, GlassRoots must provide information about our constituents. This information will be held in confidence and will in no way affect your child's participation in our programs.

Household Income:

\$10 - \$24,999 \$25,000 - \$49,999 \$50,000 - \$74,999 over \$75,000

Number of people (over 18) in household _____ Number of children under 18 _____

Are you eligible for free or reduced meals during the school year? YES NO