2025

CARBON COUNTY WORKFORCE TRAINING

50 E. Locust Street, Suite 1, Nesquehoning, PA 18240

PRELIMINARY APPLICATION FOR SUMMER EMPLOYMENT OR INTERNSHIP PROGRAM

APPLICANTS MUST BE AGE 14 TO 24 AND A RESIDENT OF CARBON COUNTY Please submit your preliminary application by no later than 4/30/2025

PLEASE PRINT

Last Name First 1		First Name	ne M.I.		Social Security Number					
Street	Address		City		Zip Code					
2	Home Ph:									
Phone Numbers		Your Cell:								
문 전	Other (parent, relative, etc.):									
		,								
E-mai	l address:									
Date	of Birth:	Ag	e:	Gender	: 🗆 Male 🕒 Female					
Are y	ou a United States Citizen?	☐ Yes ☐ No)							
-	If you answered No, are you		vork in the U.S.?	☐ Yes	□ No					
Ethnic	city: Do you consider yourself	to be Hispanic.	/Latino? 🔲 Yes	□ No						
		-			ace category may be selected.)					
Race	: 🗖 American Indian or Alas	kan Native	□ Asian □	3 Black o	r African American					
	☐ Native Hawaiian or Paci	fic Islander	■ White							
If you	If you are a male age 18 years or older, are you registered with Selective Service?									
	□ High School Student No	ime of school:			Grade Level:					
☐ High School Student Name of school: Grade Level: _ ☐ College Student Name of school: Yrs. Completed: _										
Sta	What is your major?									
College Student Name of school:										
nca	☐ College Graduate De	gree attained:_			·					
☐ High School Dropout Highest grade level you finished in school:										
	☐ Attending GED Classes									
Are you a Foster Child? □ Yes □ No										
Are you an individual with a disability?										
If you	If you are a student, do you have an IEP, Section 504 Plan, or attend Learning Support Classes? ☐ Yes ☐ No									

Are you a parent or an expectant parent?	☐ Yes	□ N)				
Have you ever been arrested or convicted o	of comm	nitting a	crime? 🗆 Yes 🗆	I No			
Do you have a drug or alcohol abuse proble If yes, are you currently receiving counseli		⊒ Yes □ Yes	□ No □ No				
EMPLOYMENT HISTORY (Include all jobs you have	e held, sto	art with ye	our present or last job.)				
Employer	_	ates loyed To	Job Title	Hourly Wage	Hours per week	Reason for Leaving	
1.							
2.							
3.							
Do you have a valid driver's license?		No No	If you do not have a photo ID?	☐ No	•	you have a	
Do you have reliable, daily transportation?	☐ Ye	es 🗖 1	10				
Are you willing and available to work Monday through Friday?							
Is there a specific type of job you are interested in that would be helpful for your career goals? If yes, describe:							
Are you aware of, or interested in, working for any specific local agencies or businesses that would be in line with your career goals? If yes, please name them:							
Do you have any special skills, training, or participate in extra-curricular activities? If yes, describe:							
Are you receiving, or are you eligible to rece	eive, a fr	ee or re	duced price school lu	ınch? 🛚 Ye	s 🗖 No		
Are you or your family currently receiving Co			·		☐ Ye		
Are you or your family currently receiving Foo			Yes □ No				
Have you or your family received Food Stam	ıps at aı	ny time	during the past six mo			□ No	
Do you receive a Social Security dependent benefit?							
Do you receive SSI (Supplemental Security In	come)?	? 🗆 '	′es □ No				

FAMILY SIZE AND INCOME – PLEASE READ INSTRUCTIONS

Total number of people in your family ** (include your	ourself):

**NOTE: <u>FAMILY</u> is anyone living in your household who is related to you by blood, marriage or decree of court.

INSTRUCTIONS: In the section below, it is important that you list the names of <u>all</u> family members who live in your household, their income source, and amount received **during the past six-month period**. Include income from sources such as: gross wages/salary, unemployment benefits, Social Security benefits, disability benefits, retirement benefits, workmen's compensation, alimony, child support, self-employment income (gross receipts minus operating expenses), and any other sources of periodic income. You must include <u>all</u> sources of income to show how the family was supported during the past 6 months. If a family member has had no income during the past six months, please write NONE.

NAME	AGE	RELATIONSHIP TO APPLICANT	EMPLOYER NAME OR INCOME SOURCE	GROSS INCOME PAST SIX MONTHS
		Applicant		
		- фриз		

<u>PLEASE NOTE:</u> Your application <u>cannot</u> be processed if you fail to complete the family income section above. Be sure you have listed <u>every</u> family member living in your household, whether they have any income or not. If they have had no income in the past six months, write NONE in the employer/income source column. If all family members have zero income, please explain how your family is supported.

We reserve the right to limit 14 and 15-year-old enrollments to	ensure compliance with Child
Labor Laws.	

DO NOT submit your Work Permit with this pre-application.

All Summer Employment applicants must be:

- Age 14 to 24
- A resident of Carbon County

This is only a preliminary application. It does not guarantee a position on one of Carbon County Workforce Training's Summer Employment or Internship programs.

I understand that if I am contacted for an interview, I will be asked to provide documentation of the information I have listed on this pre-application. I allow release of the information contained on this pre-application for verification purposes and understand that it will be used to determine program eligibility.

Signature of Applicant	Date	
Signature of Parent or Guardian (not required if applicant is 18 or over)	Date	

Applications may be submitted via email to WIOASYEP@carboncareerlink.org

Please review this pre-application and make sure you have answered <u>ALL</u> questions.

If you are a new applicant, please create a PA CareerLink account.

Returning applicants have a PA CareerLink account.

Only signed and completed pre-applications with PA CareerLink accounts will be processed.

Questions? Please call 570-325-2915 X114

An Equal Opportunity Employer/Program

Auxiliary aids and services are available upon request to individuals with disabilities

Creating your PA CareerLink Account

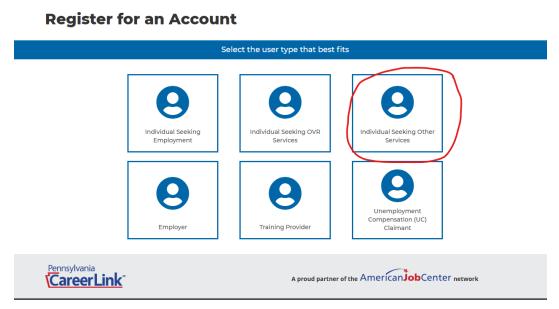
Step 1. Open <u>www.PAcareerlink.pa.gov</u>

Step 2. Click Sign In/Register as a New User.



Step 3. Click on Individual Seeking Other Services.



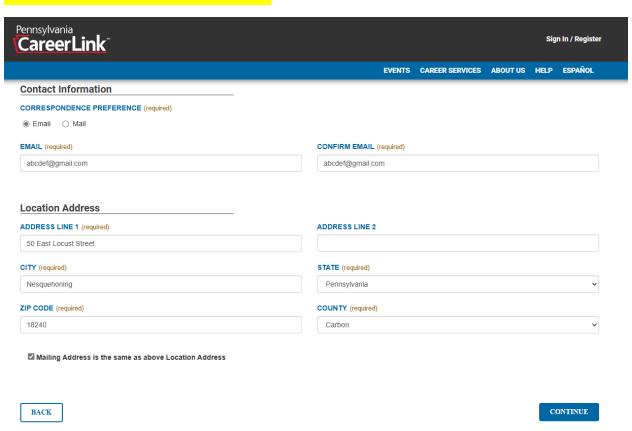


4. Fill in Job Seeker Registration form.

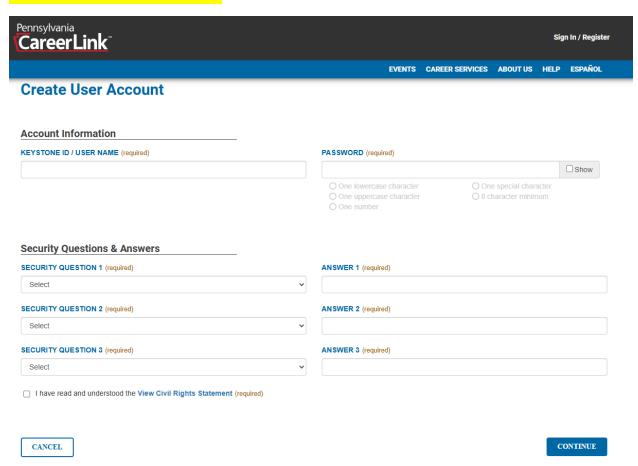
Pennsylvania CareerLink						Sign In / Register		
			EVENTS	CAREER SERVICES	ABOUT US	HELP	ESPAÑOL	
Job Seeker Registration							PLOYERS STER HERE	
Welcome to the PA CareerLink®. You are registering as Needy Families (TANF), Supplemental Nutrition Assista				vices, Human Service	s, Temporary	Assista	ince for	
Please provide the information requested and click the "Continue" buttons to walk through each portion of the registration process. Once you are successfully registered, you can submit a referral for the services you would like to receive. Already have a Keystone ID from another PA site? Sign in here.							registered,	
FIRST NAME (required)	MIDDLE INITIAL			LAST NAME (required)			
John		Smith						
DATE OF BIRTH (required)	SOCIAL SECURITY NUMBER (SSN)			CONFIRM SOCIAL SECURITY NUMBER (SSN)				
06/04/1980	000-00-0000			000-00-0000				
HAVE YOU APPLIED FOR, OR ARE YOU RECEIVING BE (a) Yes (b) No ARE YOU REGISTERING TO COMPLY WITH THE UC REFOREMPLOYMENT SEARCH SERVICES? (required) (c) Yes (d) No La View list of benefits and services (pdf) (e) View our privacy policy			N WITH A	DISABILITY SEEKING	GOVR SERVI		ONTINIE	

5. Hit Continue.

6. Enter Contact Information.



7. Create User Account



8. Hit Continue.

Questions? Contact Carbon County Workforce Training at 570-325-2915 for any issues.