



Youth Enrollment Checklist

Name: _____ Age: _____ Male In-School
 Female Out-of-School

Item to Document	Document Used			
Name/Date of Birth	<input type="checkbox"/> State ID or Driver's License <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Self-Attestation (in extreme circumstances only) <input type="checkbox"/> Other: _____			
Social Security Number	<input type="checkbox"/> Social Security Card <input type="checkbox"/> UI Records with SSN & Name that indicates earnings <input type="checkbox"/> SSA Printout verifying SSN <input type="checkbox"/> Self-Attestation (in extreme circumstances only)			
Citizenship	<input type="checkbox"/> US Birth Certificate <input type="checkbox"/> I-9 Form with supporting Documents <input type="checkbox"/> Self-Attestation (in extreme circumstances only) <input type="checkbox"/> Other: _____			
Selective Service (if applicable)	<input type="checkbox"/> Printout from www.sss.gov <input type="checkbox"/> Selective Service Card			
Household Income	<input type="checkbox"/> Proof of Free/Reduced Lunch (In-School Youth) <input type="checkbox"/> DHS documents verifying TANF or SNAP <input type="checkbox"/> Recent check stubs for all household members <input type="checkbox"/> Most Recent Tax Return <input type="checkbox"/> Self-Attestation (in extreme circumstances only) <input type="checkbox"/> Other: _____			
TANF (if applicable)	<input type="checkbox"/> MDHS documents verifying TANF			
SNAP (if applicable)	<input type="checkbox"/> MDHS documents verifying SNAP			
SSI (if applicable)	<input type="checkbox"/> Social Security Administration Letter verifying SSI <input type="checkbox"/> Proof of SSI payment or Direct Deposit			
Free/Reduced Lunch (if applicable)	<input type="checkbox"/> School Record or Letter showing participant receives Free or Reduced Lunch for the current school year			
Lives in High Poverty County (if applicable)	<input type="checkbox"/> Proof of residence <input type="checkbox"/> Signed statement from Youth Provider			
Documents for I-9 <i>Must have either 1 document from Column A or 1 document from both Columns B & C</i>	<table border="1" style="width:100%; text-align:center;"> <tr> <td style="width:33%;">Column A</td> <td style="width:33%;">Column B</td> <td style="width:33%;">Column C</td> </tr> </table>	Column A	Column B	Column C
Column A	Column B	Column C		

BARRIER SECTION

Check the youth's barrier and write in document used to document at least one barrier

In-School Youth <i>(must be low-income & have one of the following barriers)</i>	Out-of-School Youth
<input type="checkbox"/> Basic Skills Deficient: _____ <input type="checkbox"/> English Language Learner: _____ <input type="checkbox"/> Offender: _____ <input type="checkbox"/> Homeless or Runaway: _____ <input type="checkbox"/> Foster Child: _____ <input type="checkbox"/> Pregnant or Parenting: _____ <input type="checkbox"/> Disability: _____ <input type="checkbox"/> Requires Additional Assistance: _____	<input type="checkbox"/> High School Dropout: _____ <input type="checkbox"/> Compulsory School Age, not attending School: _____ <input type="checkbox"/> Offender: _____ <input type="checkbox"/> Homeless or Runaway: _____ <input type="checkbox"/> Foster Child: _____ <input type="checkbox"/> Pregnant or Parenting: _____ <input type="checkbox"/> Disability: _____ <input type="checkbox"/> Low-Income & HS Grad/HSE & BSD: _____ <input type="checkbox"/> Low-Income & Requires Add. Asst: _____

Required Forms for Enrollment

Release of Information (ISY only)	
Basic Skills Screening Tool	
Acknowledgement Form	
Grievance Discrimination Form	
Grievance Non- Discrimination Form	
Attestation Form	
Youth & Career Coach Agreement	
Youth ISS	
Proof of Attending School (ISY only)	

Required Forms for Work Experience

Essential Job Skills Certificate	
Signed Worksite Agreement & Job Description	
Signed Timesheets	