



SUMMER YOUTH EMPLOYMENT PROGRAM (SYEP) 2026

Attached is an application for SYEP. All applications must be completed and returned by
May 15th, 2026.

Late applications will not be accepted. Completing an application and participating in an orientation session does NOT guarantee employment.

IMPORTANT INSTRUCTIONS – READ CAREFULLY AS FAILURE TO FOLLOW THESE INSTRUCTIONS MAY RESULT IN YOUR APPLICATION BEING REJECTED

- Complete all required fields—**incomplete applications will not be accepted.**
- Ensure all phone numbers provided are accurate and active.
- Provide an active email address that you **check regularly.**
- SYEP will tentatively run from July 6, 2026, through August 14, 2026.
- Participants will earn **\$16.00** per hour, with work hours varying by worksite.
- Eligible applicants must attend an orientation, which will be scheduled in June (*if you are under the age of 18, a parent or guardian will be needed to sign forms*).

ORIENTATION:

The following documents **must be provided at the time of orientation:**

- Social Security Card
- Photo ID (Driver's License, Government-issued ID, School ID, or Passport)
- Proof of Date of Birth (Birth Certificate, Driver's License, or Passport)
- Proof of Citizenship or Eligible Alien Status (Birth Certificate, Passport, or Permanent Resident Card)
- Proof of Total Family Income for the Past 6 Months (examples include):
 - Year-to-date pay stubs
 - Tax Form 1040 or 1040A
 - Proof of Public Assistance
 - SSI or SSD award letter
 - Official Foster Care letter
- Valid Working Papers (required for youth ages 14–17):
- Completed application with signatures from the applicant and parent/parent guardian, if participant is under 18.



SYEP Frequently Asked Questions

How do I qualify for SYEP?

To be eligible for SYEP, you must:

- Be at least 14 years old and not older than 24 years old as of July 1, 2026
- Be a permanent resident of Jefferson County, New York
- Meet income eligibility requirements, which include:
 - Your household income is at or below 200% of the federal poverty level
 - Your household receives Temporary Assistance, SNAP, Medicaid, HEAP, and/or SSI/SSDI

You may also qualify under additional funding categories if you:

- Have a disability
- Have been involved with the criminal justice system
- Are pregnant or a parent
- Are currently in foster care or have aged out of foster care

Why do you need family income information?

Jefferson County's Summer Youth Employment Program is funded by the Office of Temporary and Disability Assistance, with additional funding from the federally funded WIOA Youth program. Under these guidelines, everyone working in the home must be noted. Be sure also to list ALL PERSONS living in the home regardless of employment status, including unborn children.

200% of Federal Poverty Level Guidelines EAF Gross Available Test By Family Size (Adjusted Annually)

Household Size	Annual	Monthly
1	\$31,300	\$2,608
2	\$42,300	\$3,525
3	\$53,300	\$4,442
4	\$64,300	\$5,358
5	\$75,300	\$6,275
6	\$86,300	\$7,192
7	\$97,300	\$8,108
8	\$108,300	\$9,025
Each Additional Member	\$11,000	\$917

1000 Coffeen St
Watertown, NY 13601
315-786-3651



5274 Outer Stowe St
Lowville, NY 13367
315-376-5800

How do I submit my application for SYEP?

After completing and reviewing your application, you may submit it by one of the following methods:

- Email aworden@jeffersoncountyny.gov or agarno@jeffersoncountyny.gov
- Mail or drop off your application here:
The WorkPlace
1000 Coffeen Street
Watertown, NY 13601
Attn: Youth Department
- Submit online using the Google Form here: <https://forms.gle/dADpuXw4gcz5vJHQ7>

How will I know if I am selected to participate in SYEP?

Selected applicants will receive a notification by phone with instructions on the next steps, including orientation and required paperwork.

If I applied or worked last year, do I need to apply again in 2026?

Yes. You must submit a new application each year. Only applicants who apply during the 2026 application period will be considered.

Do I need Working Papers?

Yes, if you are between the ages of 14 and 17.
(Blue Card for 14-15-year olds or Green Card for 16-17-year olds).

How do I obtain Working Papers?

Contact the counseling office of the school district you live in to schedule an appointment to fill out an application and provide documentation to the school counselor. You will also need:

- The signature of your parent or guardian
- Proof of age (your birth or baptism record, driver's license, state-issued photo ID, school record, or passport)
- A written statement from a doctor, nurse practitioner or physician assistant that you are physically fit to work

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Can I attend summer school and participate in SYEP?

It depends. This is up to the SYEP worksite and whether they can arrange a schedule that accommodates both work and school. Positions are limited.

How many jobs are there?

The number of jobs depends upon available funding, which will not be determined until May or June. There will be many more applicants than jobs.

Do I have to go through an Orientation if I went through one last year? Yes. If you are selected to work with SYEP, a requirement is to attend the Orientation. Attendance is mandatory. The Orientation will discuss topics that will help you have a successful summer work experience.

What type of summer jobs are available?

SYEP has traditionally offered jobs in clerical, healthcare, camp/recreation, cultural, childcare, food/kitchen, maintenance services, etc., in various government and nonprofit agencies, as well as privately owned businesses to provide a multitude of experience and skill-building.

Am I guaranteed a job after applying and participating in Orientation?

No youth is guaranteed employment.



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YOUTH WORK EXPERIENCE PROGRAM APPLICATION

PLEASE PRINT LEGIBLY.

Please check the work experience program you are applying for: Year-Round Summer Only

Last Name: _____ First Name: _____ M.I. ____ DOB: _____ Age: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address (If different than above): _____

Phone: _____ Carrier: _____ Do you accept texts? Yes No

Email: _____ Preferred contact method: Email Phone Mail

Parent/Guardian Phone Number (if under 18): _____

Gender: _____ Race: _____ Ethnicity: Hispanic or Latino Not Hispanic or Latino

Are you a US Citizen? Yes No

If no, what is your immigration status? (See table on last page) _____

Please provide your INS Form Number: _____ Alien Registration Number: _____

Date of Entry into United States: _____

Are you registered with the US Military Selective Service? Yes No

(Only required if you were assigned male at birth and at least 18)

Are you currently enrolled in any of the following:

Middle School High School GED BOCES/Vocational College None

If yes, which grade/level are you in or going into this fall? _____

Name of school: _____ Program/Subject Studied: _____

If not in school, do you have a high school diploma? Yes No

Do you have a disability? Yes No

If yes, how would you describe your disability?

*Note: **Diagnosed** depression, anxiety, or ADHD count as disabilities.

- | | |
|---------------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Physical or chronic health condition | <input type="checkbox"/> Physical or mobility impairment |
| <input type="checkbox"/> Learning disability | <input type="checkbox"/> Mental or psychiatric disability |
| <input type="checkbox"/> Cognitive or intellectual disability | <input type="checkbox"/> Hearing-related disability |
| <input type="checkbox"/> Vision-related disability | |

Are you a migrant/seasonal worker? Yes No

Did you serve in the United States Armed Forces? Yes No

If yes, which US military branch? _____ Dates of service: _____ to _____

Have you been or are you involved with the juvenile or adult justice system? Yes No

If yes, are you on probation or parole? Yes No

Name of Probation/Parole Officer (If Applicable) _____

Are you currently employed? Yes No

Have you ever worked before? Yes No

If yes, please fill in the information for your most recent employment:

Job Title: _____ Start Date: _____ End Date: _____

Employer: _____ Address: _____

Hours worked per week: _____ Hourly wage: _____

Reason for leaving: _____

Do you have a driver's license, driver's permit, or non-driver ID? Yes No

If yes, what is the ID number? _____ Type: _____

Do you have reliable transportation to and from work? Yes No

Describe transportation: _____

Report the gross income for every person who lives in your household. Include parents, step-parents, and siblings (including half-siblings) under 18, or 18 and still in high school. If you have a child, include your child, the child's other parent, and any of your child's siblings who live with you. Do not include anyone who does not live with you.

List all sources of gross income, such as wages, Social Security, public assistance, child support, alimony, and any other regular income. You do not need to include earned income for anyone under 18, but you must include any unearned income they receive.

Use the income sources listed below in itemizing the total family income:

- Gross wages ■ Unemployment Compensation ■ Retirement pension ■ Child Support/Alimony
- Military Wages (Base Pay) ■ Social Security Benefits (SSI, SSR, SSD) ■ Net Rental Income
- Veteran's Benefits (Disability, Pension) ■ Workman's Comp. ■ Net Self-Employment Income (Quart. Est. Tax)

Family Member(s)	Relationship	Age	Income Source/ Employer Name	Total to be received THIS MONTH	Total received for PAST 6 MONTHS	Total received for the PAST YEAR
	Applicant					

How many people total are in your household? _____

Are you eligible to receive free or reduced-price school lunches? (only applies to WIOA)

Answer "No" if your school provides free lunches to all students, regardless of income. Yes No

Are you or is anyone in your family currently receiving any Public Assistance? Yes No

If yes, check all that apply and enter the issue date:

- TANF (Temporary Assistance for Needy Families) Issue date: _____
- Exhausting TANF within two years Issue date: _____
- TANF Exhaustee Issue date: _____
- SNAP (Food Stamps) Issue date: _____
- SSI (Supplemental Security Income) Issue date: _____
- SSDI (Social Security Disability Insurance) Issue date: _____
- TA (Temporary Assistance, formerly GA) Issue date: _____
- RCA (Refugee Cash Assistance) Issue date: _____
- Safety Net/Home Relief Issue date: _____
- HEAP Issue date: _____
- Medicaid Issue date: _____
- Other state or local income-based public assistance (such as WIC, Section 8, Childcare Assistance, etc.): _____ Issue Date: _____

CHECK ANY OF THE FOLLOWING THAT APPLY:

- I feel I have cultural barriers to employment.
- I am a parent/I'm pregnant/I have a pregnant partner (also check if you are a non-custodial parent).
- I am homeless and/or a runaway.
- I am a foster child, or I have aged out of foster care.

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 your statements. If you disagree with any decisions we make regarding your eligibility to receive TANF or WIOA services, you may have your certification reviewed by a person at a level above the person who made the first decision.

By signing this, I am swearing, under penalty of perjury, that all of the above statements are true to the best of my knowledge and that I am willing to cooperate with any efforts to verify the information provided. If the applicant lives with his or her parents, a parent or other adult relative caretaker must sign this form for the application to be complete. The Commissioner of the Department of Social Services or his or her designee must sign for children in foster care.

Signature of applicant: _____ Date: _____

Signature of parent/guardian (if applicant is under age 18): _____

Signature of DSS Commissioner or applicant's designee if in foster care: _____

STAFF USE ONLY	The applicant is certified for TANF services: <input type="checkbox"/> Yes <input type="checkbox"/> No The applicant is certified for WIOA services: <input type="checkbox"/> Yes <input type="checkbox"/> No	Staff Initials/Date:
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Job Interests

To help staff identify a job that will interest you, please review the Job Descriptions listed below and rank them from 1-5 (1: **most** interested; 5: **least** interested). We cannot guarantee the jobs you pick will be available, but we will try our best to take your interests into consideration.

___PUBLIC WORKS AIDE: Indoor and outdoor laborer position. (not good if you have dust/pollen allergies)

___OFFICE AIDE: Duties could include computer data entry, filing, answering phones, operating office machines, and performing other office functions as requested.

___CHILDCARE AIDE: Workers must be responsible and enjoy working with young children. Would include indoor and outdoor activities, leading games, serving snacks, and may require cleanup of classroom areas.

___LIBRARIAN AIDE: Requires working in a local library. Workers may be responsible for answering phones, assisting patrons, participating in children’s story hour/activities, and inventory control.

___FOOD SERVICE AIDE: Involves assisting with basic food preparation such as washing and cutting vegetables, making sandwiches, sanitizing utensils and dishes, packing and transporting meals within a facility.

IMMIGRATION STATUS NUMBER

(Only applicable if you answered No to “Are you a US Citizen?”)

1	Refugee	8	Veteran, spouse, unmarried surviving spouse and unmarried dependent child of a U.S. veteran who fulfilled minimum active duty requirement (2 years)
2	Cuban/Haitian Entrants	9	Active Military: Active duty or a member of the Armed Forces on full-time duty in the Army, Navy, Air Force, Marine Corps or Coast Guard, spouse and children
3	Asylees	10	Conditional Entrant (Status granted to refugees before 1980)
4	Amerasian Immigrants	11	A US citizen's or LPR's battered spouse or child, or parent or child of such person, who obtains "Notice of Prima Facie Case from USCIS under the Violence Against Women Act (VAWA)
5	Deportation or Removal Withheld	12	Victim of Human Trafficking
6	Certain Hmong or Highland Laotian	13	Parolee (for at least one year) (Non-citizens who have been allowed to come into the U.S. for humanitarian or public interest reasons)
7	Lawfully Admitted For Permanent Residence (LPR) <u>without</u> 40 Qualifying Quarters	14	North American Indian born in Canada
		15	Member of federally recognized tribe born outside U.S.