Columbia Housing

Summer Youth Employment Program (SYEP) Application
APPLICATION PERIOD: April 8, 2025 - May 2, 2025

Program Start and End Date: *June 30, 2025 through July 25, 2025*

Thank you for your interest in Columbia Housing's Summer Youth Program! Being a part of this program will allow you (the student) the opportunity to explore your interests and career path, while developing workplace skills and engaging in learning experiences that help in developing social, civic, teamwork and leadership skills!

While Columbia Housing wishes that we can hire all that apply, we only have a limited number of positions available; so please understand that submission of an application does not guarantee that you will be hired.

Applicants must be a Columbia Housing resident participating in either the Public Housing or Housing Choice Voucher programs.

PERSONAL INFORMATION - please fill in each blank.

LAST NAME: _____   FIRST NAME: _____

STREET ADDRESS: _____

CITY: _____

STATE: _____   ZIP CODE: _____

YOUTH'S EMAIL: _____

PHONE NUMBER: _____

DATE OF BIRTH: _____

SCHOOL: _____

GRADE LEVEL 2025-2026 SCHOOL YEAR
- ○ 9th Grade
- ○ 10th Grade
- ○ 11th Grade
- ○ 12th Grade
- 2025 Graduate

PARENTAL INFORMATION - please fill in each blank.

PARENT'S/ GUARDIAN'S NAME

STREET ADDRESS:

CITY, STATE & ZIP

CELLULAR #:   HOME PHONE #:

PARENT'S/ GUARDIAN'S EMAIL ADDRESS:

EMERGENCY CONTACT'S NAME: EMERGENCY CONTACT'S NUMBER:

RELATIONSHIP TO APPLICANT:

PLEASE LIST APPLICANT'S ALLERGIES AND MEDICATIONS NEEDED. IF NONE, PLEASE PUT N/A IN BOX.

ARE THERE ANY OTHER MEDICAL OR COGNITIVE CONDITIONS WE NEED TO BE AWARE OF?

○ Yes
○ No

IF YES, PLEASE LIST HERE:

WORK EXPERIENCE
(i.e., chores, yard work, babysitting, etc.) - Please include additional sheet, if needed

Company or person's name   Telephone #

Supervisor's Name, if different from above

Job Duties

[ ]

EXTRACURRICULAR ACTIVITIES, COMMUNITY INVOLVEMENT, AWARDS - please attach additional pages, if necessary

[ ]

PLEASE ANSWER THE FOLLOWING QUESTIONS

What is your favorite subject in school and why is that your favorite subject?

[ ]

What type of work are you interested in doing at Columbia Housing?

☐ Administrative/Clerical

☐ Maintenance/Grounds Helper

☐ Any area

If there is a specific area* you would like to work in, (i.e

IT, Finance, Human Resources, Safety, Communications, Resident Services, etc.)? If so, please list below:

[ ]

*CH will do its best to put you in your desired area. However, all youth may not be able to work in desired area(s).

What do you want to gain from working at Columbia Housing this summer?

[ ]

DISCLAIMER AND SIGNATURE

I hereby certify that the facts set forth in the above employment application are true and complete, to the best of my knowledge, and I authorize Columbia Housing (CH) to verify their accuracy and to obtain reference information on my character, work and/or attitude. I hereby release CH from any/ all liability of whatever kind and nature which, at any time, could result from obtaining and/or making an employment decision based on such information.

I understand that, if employed, falsified statements of any kind and/or omissions of facts on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment at CH. However, I further understand that neither the policies, rules, regulations of employment, nor anything said during the interview process, shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or CH may terminate my employment at any time with or without notice or cause.

I hereby declare that this application's information is accurate and complete to the best of my knowledge. I understand that failure to complete this application, in its entirety, will result in the non-consideration of an incomplete application.

NOTE: If selected, Human Resources will need verification of your age. You must provide a copy of your birth certificate, driver's license, Medicaid card or some other form of identification that verifies age.

Applicant's signature		Date	
Parent/Guardian's signature		Date	