



Summer Youth Employment Program (SYEP) 2024 Document Guide

Summer Youth Employment Program

Department of Youth and Community Development

Summer Youth Employment Program (SYEP)

Older Youth (OY) 16 - 24 Years Old
Internship/Worksite Experiences
6 weeks - 25 hours/week (Total 150 hours)
\$16/hour
Cohort A - July 1, 2024 - August 9, 2024 Cohort B - July 8, 2024- August 16, 2024

Types of SYEP





CareerReady	<ul style="list-style-type: none">● School based allocation between 75 - 200 slots for selected schools● Schools are paired with a CRSYEP provider who leads the recruitment, enrollment and worksite development
Community Based (Lottery)	<ul style="list-style-type: none">● All students can apply to SYEP Lottery ~ 30% are accepted depending on the number of applications received● Students chooses an SYEP Lottery provider
Special Initiatives	<ul style="list-style-type: none">● Sector Based ✓● Emerging Leaders● MAP to \$uccess● CareerFirst (NYCHA)● Ladder 4 Leaders

NYC DYCD Required Document Checklist:

- Copies of these documents are required by the Department of Youth and Community Development (DYCD) to officially complete enrollment so that students are eligible for SYEP

2024 SYEP: Older Youth Document Checklist

For successful enrollment, please provide ONE DOCUMENT from each category as applicable. Please note: some documents may fulfill more than one category.

<h3>Proof of Identity</h3>  <ul style="list-style-type: none">✓ Official Picture ID (school, city, state, government issues) <i>IDNYC Municipal ID will be accepted</i>	<h3>Proof of Social Security Number</h3>  <ul style="list-style-type: none">✓ Social Security Card
<h3>Proof of Age</h3>  <ul style="list-style-type: none">✓ Birth Certificate✓ Benefit Card✓ NYS Driver/ Non-Driver's License✓ Permanent Resident or Alien Registration Card✓ Valid U.S. Passport (signed)	<h3>Proof of Address</h3>  <ul style="list-style-type: none">✓ Home Utility Bill✓ Current Lease, Mortgage, Deed, Rent Bill✓ Bank or Credit Card Statement✓ Insurance✓ Official Mail from Federal, State, City Agency or your school <p>*must be dated within 6 months of enrollment</p>
<h3>Proof of Employment Authorization</h3>  <ul style="list-style-type: none">✓ Report Card within the last 6 months✓ Official school transcript✓ Valid signed passport✓ Alien Registration Card✓ US Military Card/ Draft Card✓ Voter's Registration Card✓ I-94, I-551, I-797 forms✓ Certificate of Naturalization✓ Employment Registration Card <p>*You may be asked to provide additional documentations depending on your employment authorization status</p>	<h3>Only if Applicable</h3>  <ul style="list-style-type: none">✓ Proof of Disability: Official documentation as applicable certifying disability from a physician, ACS, HRA, School (IEP from school), Social Service agency or authorized entity on letter head✓ Selective Service Registration Card or Selective Service Online Receipt (Males 18 years of age and older)✓ Green Working Paper Card for <u>16-17 year old youth</u>

To be submitted by participant onto Youth Employment Programs (YEPS) online

- 1) **Proof of Identity**
- 2) **Proof of Social Security Number**
- 3) **SYEP Application**
- 4) **Proof of Age**
- 5) **Proof of Address**
- 6) **Proof of Employment Authorization**
- 7) **Working Papers**
- 8) **Selective Service (18yo & over male participants)**
- 9) **Proof of Disability**

SYEP Application Steps

1. Navigate to:
https://www1.nyc.gov/accout/login.htm?spName=application.nycsyep.com-SAML&samlContext=us1_8176884_c3bb88e2-9016-4c17-8ea8-3d175261ed06
2. Students must create a NYC.ID account in order to start the application by clicking **Create Account**.
3. After students create an account, they would return back to this homepage and enter the Email Address or Username and password created.

The screenshot shows the login page for the 2024 Summer Youth Employment Program (SYEP) Application. At the top, the NYC Department of Youth & Community Development logo is displayed. Below it, a dark blue banner contains the text: "2024 Summer Youth Employment Program (SYEP) Application" and "DYCD Youth Employment Programs". Underneath the banner, a red text prompt reads: "To start or log into your application Register or sign in to NYC.ID by selecting one of the available options below."

The main content area is titled "Login" and is divided into two sections. The left section, "Log in using your NYC account", features a form with two input fields: "Email Address or Username" and "Password", both marked with an asterisk. Below these fields is a blue "Login" button. The right section, "Log in using one of these options", offers social login options: "NYC Employees", "Google", "Microsoft", "LinkedIn", and "Yahoo".

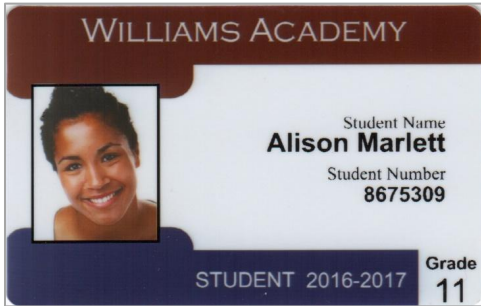
At the bottom of the page, there are three links: "Forgot Password" on the left, "Create Account" in the center, and "Report an Issue" on the right. Two large orange arrows are superimposed on the page: one pointing from "Forgot Password" to "Create Account", and another pointing from "Report an Issue" to "Create Account".

ONLY COPIIES OF THESE DOCUMENTS WILL BE ACCEPTED. PLEASE DO NOT SUBMIT ORIGINAL DOCUMENTS

1. Proof of Identity

- Official Picture ID (school, city, state, government issued). IDNYC Municipal ID will be accepted

Or: NYS Driver/Non-Driver's License, Permanent Resident or Alien Registration Card, Valid U.S. Passport (must be signed)



2. Proof of Social Security Card

- Social Security Card



MUST BE SIGNED

Parent/Guardian Signature Required if Under 18 →

3. SYEP Application

4

2024 SYEP Participant Application

Do you have previous work experience? Yes No

Do you have a bank account? Yes No

Are you interested in opening a savings account? Yes No

Would you like to be paid through Direct Deposit? Yes No

Please check off three (3) career goals:

<input type="checkbox"/> Advertising	<input type="checkbox"/> Entrepreneurship	<input type="checkbox"/> Media & Entertainment
<input type="checkbox"/> Architecture	<input type="checkbox"/> Fashion Design	<input type="checkbox"/> Non-Profit
<input type="checkbox"/> Arts & Culture	<input type="checkbox"/> Graphic Design	<input type="checkbox"/> Philanthropy
<input type="checkbox"/> Business & Financial Services	<input type="checkbox"/> Healthcare/ Medical	<input type="checkbox"/> Politics
<input type="checkbox"/> Childcare	<input type="checkbox"/> Hospitality Management	<input type="checkbox"/> Psychology/ Counseling
<input type="checkbox"/> Communications & Broadcasting	<input type="checkbox"/> Human Resources	<input type="checkbox"/> Public Service
<input type="checkbox"/> Computer Science	<input type="checkbox"/> Information Technology	<input type="checkbox"/> Real Estate
<input type="checkbox"/> Conservation & Environmental Justice	<input type="checkbox"/> Law Enforcement	<input type="checkbox"/> Retail
<input type="checkbox"/> Construction	<input type="checkbox"/> Legal Services	<input type="checkbox"/> Science & Mathematics
<input type="checkbox"/> Education	<input type="checkbox"/> Management	<input type="checkbox"/> Sports
<input type="checkbox"/> Engineering	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation
	<input type="checkbox"/> Marketing & Sales	<input type="checkbox"/> Other

How did you hear about us? _____

Do you have access to an electronic device with internet accessibility? Yes No

SYEP Pride gives LGBTQ+ youth ages 14-24 a unique opportunity to explore their career interest and gain job experience in a supportive environment. Participants will be able to take part in trainings and special events that inspire, educate, and open doors to networking opportunities. If selected for SYEP 2024, would you like to participate in SYEP Pride?

Yes No

CERTIFICATION OF ACCURACY

I, the undersigned, certify that all the information on this form is true and correct. I understand that my statements are subject to verification. I further understand that any false statements may subject me to criminal prosecution under both New York State Penal Laws, section 175.35 and Federal Law, 18 U.S.C.A. 1001, and to civil action for return of all monies received. I agree and accept that I will abide by all applicable rules and regulations of this program.

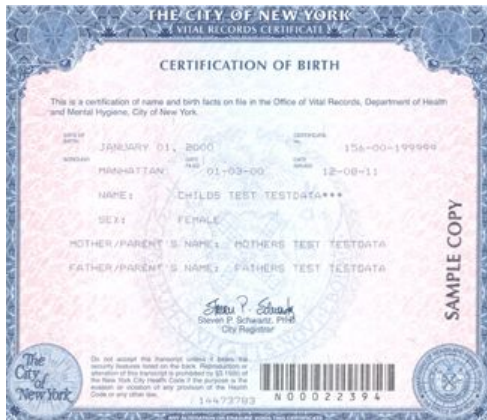
Applicant Signature: _____ Date: _____

Parent/ Guardian Signature: _____ Date: _____

3. Proof of Age

Any of the following copies will be accepted:

Birth Certificate

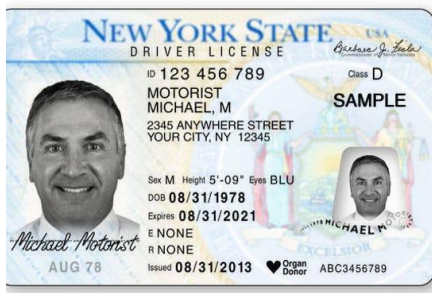


Valid U.S. Passport



Alien Registration Card

NYS Driver/Non-Driver's License



Benefit Card



MUST BE SIGNED

4. Proof of Address (dated within 6 months prior to June 2024)

Any of the following copies will be accepted:

Home Utility Bill

conEdison ON IT. Working for you 24/7.

BARBARA MONROE

Your account number: 63-3750-4962-0003-0

Service delivered to: 42-40 1ST HSE

Your electric rate: E1 Residential or Religious

Your gas rate: G33 Residential or Relg/Hg Soc Svc Benefits

Next meter reading date: Monday, Feb 1, 2010

Avoid estimated bills - please give us access to read your meter.

Your billing summary as of Jan 2, 2010

Your previous charges and payments	
Total charges from your last bill	\$207.86
Payments through Dec 30	None
Remaining balance	\$207.86
Your new charges - details start on page 2	
Billing period: Dec 01, 2009 to Dec 30, 2009	
Electricity charges - for 29 days	\$56.65
Gas charges - for 29 days	\$212.57
Adjustments	\$3.12
Total new charges	\$282.34
Total amount due	\$490.20

Payment is due upon receipt of this bill. To avoid a late payment charge of 1.5%, please pay the total amount due by Jan 25, 2010.

Contact us 24 hours a day, 7 days a week

To report a service problem, call 1-800-75-CONED or visit www.coned.com

For payments, call 1-800-752-0633 or visit www.coned.com

For other information, call 1-212-243-3003 or 1-877-282-0633

Con Edison
Cooper Station
P.O. Box 138
New York, NY 10278-0138

Wondering if you can get a better deal on your energy needs? Explore your choices at www.PlanetOfEnergy.com.

Payment slip
Please make checks payable to Consolidated Edison Company of N.Y., Inc.

To avoid a late payment charge of 1.5%, please pay this total amount due by Jan 25, 2010.

Your account number: 63-3750-4962-0003-0
Total amount due: \$490.20

Amount enclosed:

BARBARA MONROE
42-40 1ST HSE
FLUSHING NY 11358-2624

JAF STATION
P.O. BOX 1702
NEW YORK, NY 10116-1702

Current Lease, Mortgage, or Deed

New York Residential Lease Agreement

THIS LEASE AGREEMENT (hereinafter referred to as the "Agreement") made and entered into this _____ day of _____, 20____, by and between _____ (hereinafter referred to as "Landlord") and _____ (hereinafter referred to as "Tenant").

WITNESSETH:

New York, such real property having a street address of _____ (hereinafter referred to as the "Premises").

WHEREAS, Landlord is the fee owner of certain real property being, lying and situated in _____ County, New York, and

WHEREAS, Landlord is desirous of leasing the Premises to Tenant upon the terms and conditions as contained herein; and

WHEREAS, Tenant is desirous of leasing the Premises from Landlord on the terms and conditions as contained herein;

NOW, THEREFORE, for and in consideration of the sum of TEN DOLLARS (\$10.00), the covenants and obligations contained herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto hereby agree as follows:

- TERM.** Landlord leases to Tenant and Tenant leases from Landlord the above described Premises together with any and all appurtenances thereto, for a term of _____ (specify number of months or years), such term beginning on _____, and ending at 12 o'clock midnight on _____.
- RENT.** The total rent for the term hereof is the sum of _____ DOLLARS (\$ _____) payable on the _____ day of each month of the term, in equal installments of _____ DOLLARS (\$ _____) first and last installments to be paid upon the due execution of this Agreement, the second installment to be paid on _____. All such payments shall be made to Landlord at Landlord's address as set forth in the preamble to this Agreement on or before the due date and without demand.
- DAMAGE DEPOSIT.** Upon the due execution of this Agreement, Tenant shall deposit with Landlord the sum of _____ DOLLARS (\$ _____) receipt of which is hereby acknowledged by Landlord, as security for any damage caused to the Premises during the term hereof. Such deposit shall be returned to Tenant, without interest, and less any set off for damages to the Premises upon the termination of this Agreement.

Official Mail from a Federal, State, or City Agency

U.S. DEPARTMENT of STATE

NYC
Department of Education

NEW YORK CITY HOUSING AUTHORITY

Current Cable Bill (Must have Phone Service Listed)

optimum. A service of Cablevision.

1111 STEWART AVENUE
BETHPAGE, NY 11714-0381

CHANGE SERVICE REQUESTED

MR. JOHN SAMPLE
123 ANY STREET
ANYTOWN, USA 12345

Account Number
00000-000000-00-0

Due Date	Amount Due
7/15/12	\$215.60

TURN OVER FOR PAYMENT

Page 1 of 2

Our logo has changed, but our great services haven't.

We're still your TV, phone and internet company, working to give you the best TV, phone and internet.

Account Summary		Customer Service	
Account Number 00000 000000-00-0	Service for MR JOHN SAMPLE 123 ANY STREET ANYTOWN, USA 12345	Important Phone Numbers Contact Optimum anytime day or night Nassau Area 1-516-366-8600 Suffolk Area 1-631-225-5555 Service Tech Helpline 1-800-291-6564	Online Products & Support Go to www.optimum.net to pay your bill online! Find your channel lineup at www.optimum.net/support .
Billing Period Includes Payments Received By	7/01/12 - 7/31/12 6/24/12	Written Correspondence 6 Corporation Center Drive, Melville, NY 11747 Please do not write on this bill or send payments to this address.	Moving? Let us make it easy, visit us online at www.optimum.com/movers or call us for special offers for movers.
Last Bill Balance Payments - Thank You! Remaining Balance	\$231.12 \$0.00 \$231.12	Optimum News and Information Optimum Rewards	
Current Charges - Due By 7/15/12 Total Amount Due	\$215.60 \$215.60		
TOTAL MONTHLY SAVINGS: \$20.00			
Account Detail			
Payments 6/24	Payment Total Payments	\$231.12 or \$231.12 or	

4. Proof of Address (dated within 6 months prior to June 2024)

Any of the following copies will be accepted:

Official School Transcript


New York City Department Of Education Student Permanent Record	
THOMAS A. EDISON HIGH SCHOOL	
Name / Id: John Smith/123456789 Address: 3 School St QUEENS NY 11418	Message Area
Phone# 87-6543 Ofc: 990 Grade Level: 09 States: A Admit Date: 01/02/2004 Discharge Date: DOB: 04/02/1991 Gender: M Graduation Date: Parent(s): Mary Smith Counselor: JESONI	
English/ESL / 1	Actual Mark
20051 28Q020 E1 ENGLISH 100 GOLDBALLE 1.00 / 1.00 20051 28Q020 ESW1 ACCWRITN 91 ZABARY W 1.00 / 1.00 Subject Area: Actual Credits / Credits Earned: 2.00 / 2.00 Subject Area Average: 95.00% Credits Averaged: 2.00	
Social Studies / 2	Actual Mark
20051 28Q020 H15 GLOBAL 1 95 SINGLETARY 1.00 / 1.00 Subject Area: Actual Credits / Credits Earned: 1.00 / 1.00 Subject Area Average: 95.00% Credits Averaged: 1.00	
Mathematics / 3	Actual Mark
20051 28Q020 MS1F SQ MTH1 T1 90 JENKINS H 1.00 / 1.00 Subject Area: Actual Credits / Credits Earned: 1.00 / 1.00 Subject Area Average: 95.00% Credits Averaged: 1.00	
Sciences / 4	Actual Mark
20051 28Q020 SS1F LVG ENVRN 95 ANSBRO J 1.00 / 1.00 20051 28Q020 SS2 LVG ENVLE 57 MCLINA Y 0.50 / 0.50 Subject Area: Actual Credits / Credits Earned: 1.00 / 1.00 Subject Area Average: 95.00% Credits Averaged: 1.00	
Foreign Language / 5	Actual Mark
20042 30Q227 FFF+ FRENCH YR 99 2.00 / 2.00 Subject Area: Actual Credits / Credits Earned: 2.00 / 2.00 Subject Area Average: 99.00% Credits Averaged: 2.00	
The Arts / 7	Actual Mark
20051 28Q020 A1 FINE ARTS 90 QERRINGER I 1.00 / 1.00 Subject Area: Actual Credits / Credits Earned: 1.00 / 1.00 Subject Area Average: 90.00% Credits Averaged: 1.00	
Health/Physical Education / 8	Actual Mark
20051 28Q020 PSPB POLAR BEA100 HERMAN J 0.58 / 0.58 Subject Area: Actual Credits / Credits Earned: 0.58 / 0.58 Subject Area Average: 100.00% Credits Averaged: 0.58	
Exam Summary	
2004 Term 2 FXPF FREN PROF 85 Cumulative: Actual Credits / Credits Earned: 8.58 / 8.58 Cumulative Average: 95.85% Cumulative Credits Averaged: 8.58	
* Not Awarded ** Weighted Courses	
Authorization: _____ Date: _____	
Page: 1 of 1 © 2006 Copyright NYC Department Of Education 12-38-112M - March 06 - 2006	

We recommend submitting your school transcript - it can be accepted for both Proof of Address and Proof of Employment Authorization

☐ Voter's Registration

VOTER REGISTRAR

Secretary of State's Office
Elections Division
1-800-252-VOTE (8683)



VOTER REGISTRATION CERTIFICATE
(Certificado de Registro Electoral)

COUNTY (condado de)

VOID (VUID)	Gender (Sexo)	Valid from (Valido desde)
Year of Birth (Año de Nacimiento)	Prec. No. (Pct. Num.)	thru (hasta)


Name and Permanent Residence Address
(Nombre y dirección residencial permanente)

Voted in the
(Votó en la elección pública oprimiendo el botón marcado arriba)

Party/Primary
(Partido/Primaria)

CONGRESS (Congreso)	STATE SEN (Sen Estado)	STATE REP. (Rep. Estado)	COMM. DIST (Com. Pcto)
J.P. DIST (J.P. Pcto.)	CITY DIST (Ciudad dist.)	ISO (escuela)	EPCC DIST (Col. Dist.)

Cert. No. (Num. De Cert.)
Name and Mailing Address (Nombre y dirección de correo)



Sample

X

VOTER MUST PERSONALLY SIGN HEREIN IMMEDIATELY UPON RECEIPT, IF ABLE
(El votante debe firmar esta tarjeta personalmente al punto de recibida siguiente)

☐ U.S. Military Card / Draft Record

VA | U.S. Department of Veterans Affairs





Member ID
1234567890

Plan ID (80840)
1234 567 890

Member
JANE D SAMPLE

VA HEALTHCARE ENROLLEE
SERVICE CONNECTED
MEDAL OF HONOR
PURPLE HEART
FORMER POW



6. Working Papers (If Applicable)

- Working papers can be acquired through your school. **Required for students under 18 years ONLY**

AT-19

THE UNIVERSITY OF THE STATE OF NEW YORK
THE STATE EDUCATION DEPARTMENT
ALBANY, NEW YORK 12234

Student General Employment Certificate
Valid for Lawful
Employment of a Minor 16 or 17 Years of Age
Enrolled in Day School When Attendance
Is Not Required

Number _____ Date of Issuance _____

Name of Minor _____

Date of Birth _____

Signature of Minor in Presence of Issuing Official _____

(School Building and Public School District)


Signature of Issuing Official _____

Rev. 12/15 25-2760. 46. 8 (1M Pkgs) 9/92

7. Please provide ONLY if applicable:

- Selective Service Registration Card OR Selective Service "Online Receipt" (Required for males 18 years of age or older)

Selective Service System Online
Registration Form

 **Selective Service System**
Data Management Center | P.O. Box 94638 Palatine, IL 60094-4638
www.sss.gov

June 22, 2019

MEMORANDUM FOR REGISTRANT
SUBJECT: Online Verification of Your Registration

This document certifies officially that the below named individual is registered on the date shown with the Selective Service System as required by Section 3 of the Military Selective Service Act (MSSA) -- 50 U.S.C. 3802.

Selective Service Number: _____
Name: _____
Date of Registration: _____

Because you have satisfied the MSSA by registering, you remain eligible for those programs and benefits linked to registration compliance, such as student financial aid, government employment, job training, driver's license in several states, and U.S. citizenship for immigrants, for which you are otherwise qualified.

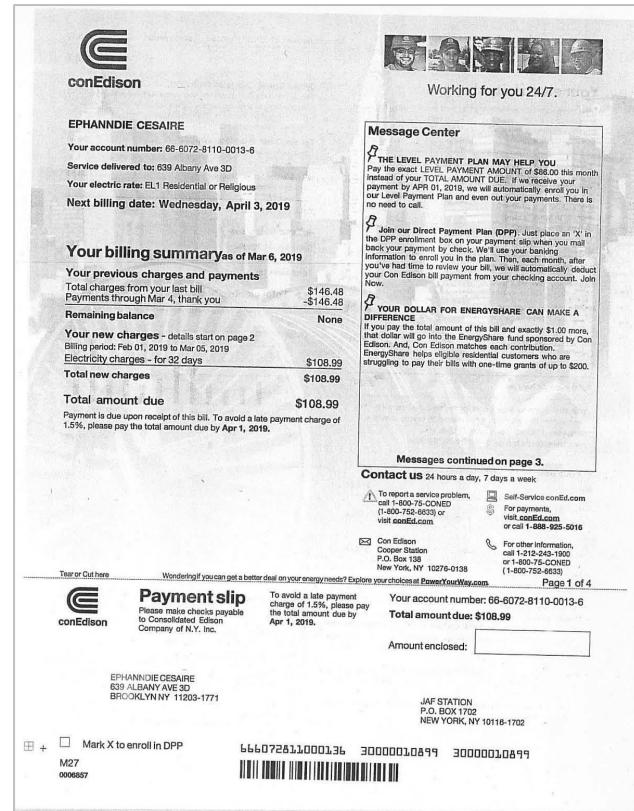
Thank you for your inquiry. If you have any further questions, please feel free to contact the Data Management Center at the address above. Our telephone number is 847-688-6888 or toll - free: 1-888-655-1825.

- Proof of Disability: Official documentation as applicable certifying disability from a physician, ACS, HRA, School, Social Service agency or authorized entity.

Ineligible Copies:



Acceptable Copy:



Acceptable Document Packet Option: Begin collecting your documents at home, to be submitted virtually

1)



MUST BE SIGNED

- Signed Passport or IDNYC**
- Municipal ID:**
 - ✓ Proof of ID
 - ✓ Proof of Age
- ✓ Proof of Citizenship/Alien Status

2)

The image is a screenshot of a "2024 SYEP Participant Application" form. It includes sections for work experience, bank account, savings account, and career goals. There are multiple checkboxes for various career fields like Advertising, Architecture, and Media & Entertainment. It also has a section for how the applicant heard about the program and access to an electronic device.

MUST BE SIGNED

- SYEP 2024 Application (digital):**
- Youth under the age of 18 are required to have the signature of a parent or guardian*
- ✓ SYEP Application

3)



MUST BE SIGNED

- Social Security Number:**
- ✓ Proof of Social Security Number

4)

New York City Department of Education
Student Permanent Record
THOMAS A. EDISON HIGH SCHOOL

Name / Id: John Smith/123456789
Address: 3 School St QUEENS NY 11418

Plat#87-6543 Old: W0 Grade Level: 00 Status: A
Admit Date: 01022004 Discharge Date:
DOB: 04021991 Gender: M Graduation Date:
Parent(s): Smith, J.C. Counselor: PEARL

English / EL 1
20051 280400 E1 ENGLISH 1 100 DOUBAILE 1 1.00 / 1.00
20051 280400 ESH1 ACC WRITN 91 ZABARY A 1.00 / 1.00
Subject Area: Actual Credits / Credits Earned: 2.00 / 2.00
Subject Area Average: 95.95% Credits Averaged: 2.00

Social Studies / L 2
20051 280400 H1E GLOBAL 1 90 SINGLETARY 1 1.00 / 1.00
Subject Area: Actual Credits / Credits Earned: 1.00 / 1.00
Subject Area Average: 95.00% Credits Averaged: 1.00

Mathematics / L 3
20051 280400 M1E1 EQ MTH 11 90 EKENSH 1 1.00 / 1.00
Subject Area: Actual Credits / Credits Earned: 1.00 / 1.00
Subject Area Average: 95.95% Credits Averaged: 1.00

Sciences / L 4
20051 280400 S11F LVO ENVIN 90 ANBRIG J 1.00 / 1.00
20051 280400 S1L LVO ENV LE 37 MOLINA Y 0.00 / 0.00
Subject Area: Actual Credits / Credits Earned: 1.00 / 1.00
Subject Area Average: 95.00% Credits Averaged: 1.00

Foreign Language / L 5
20042 300227 F1F1 FRENCH 11 90 2.00 / 2.00
Subject Area: Actual Credits / Credits Earned: 2.00 / 2.00
Subject Area Average: 99.00% Credits Averaged: 2.00

The Arts / L 7
20051 280400 A1 FINE ARTS 90 GERINGER I 1.00 / 1.00
Subject Area: Actual Credits / Credits Earned: 1.00 / 1.00
Subject Area Average: 90.00% Credits Averaged: 1.00

Health/Physical Education / L 8
20051 280400 P1P8 POLAR BEAT10 HERMAN J 0.50 / 0.50
Subject Area: Actual Credits / Credits Earned: 0.50 / 0.50
Subject Area Average: 100.00% Credits Averaged: 0.50

Exam Summary
2004 Term 2 F10FF FREN PROF 80
Cumulative: Actual Credits / Credits Earned: 8.58 / 8.58
Cumulative Average: 95.80% Cumulative Credits Averaged: 8.58

* Not Averaged ** Weighted Courses
Authorization: _____ Date: _____
Class / of / © 2004 Copyright NYC Department Of Education 12.30.12PM March 30, 2004

5)

AT-19

**THE UNIVERSITY OF THE STATE OF NEW YORK
THE STATE EDUCATION DEPARTMENT
ALBANY, NEW YORK 12234**

**Student General Employment Certificate
Valid for Lawful
Employment of a Minor 16 or 17 Years of Age
Enrolled in Day School When Attendance
Is Not Required**

Number _____ Date of Issuance _____

Name of Minor _____

Date of Birth _____

Signature of Minor in Presence of Issuing Official _____

(School Building and Public School District) _____

Signature of Issuing Official _____

Rev. 12/15 25-2760. 46. 8 (1M Pkgs) 9/92

Official School Transcript (digital):

- ✓ Proof of Address
- ✓ Proof of Employment Authorization

Working Papers:

Working papers can be acquired through your school, most often through your guidance counselor. Required for students under 18 years ONLY

- ✓ Working Papers
(If under 18 years old)