



## **Job Training Program Qualifications**

(all qualifications are required for typical entry level positions)

1. Be at least 16 years of age
2. Must want to find employment
3. Desire to learn and improve on skills needed to work in the field
4. Be able to arrive for training from 8:30 AM - 3:00 PM Monday - Friday
5. Be willing to have your legal history checked, so that you and your employment Specialist can discuss how it may impact your job search and employment.
  - Government issued picture ID: driver's license, state ID, DOC ID, or passport
  - Copy of your legal work eligibility, such as a social security card, work permit, etc.

### **Referral Information:**

- Do you currently have a friend/relative in the Skills Academy Programs? Have you participated in a program like this before?

### **How did you hear about our program? (please check one)**

- Flyer
- Website
- Parole/Probation
- Social Media
- Word of Mouth (family or friend)
- TANF
- Other Agency

# SKILLS VOCATIONAL ACADEMY PROGRAM APPLICATION

Youth under 18 years of age must have a parent must have a legal guardian signature.

Outreach/partner: \_\_\_\_\_

Date: \_\_\_\_\_

## Documents needed to Determine Eligibility for Pikes Peak Workforce Center Programs

- Application packet
- Colorado Driver's License or State ID Card (both sides in color)
- Social Security Card

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Have you worked? \_\_\_\_\_

Employer \_\_\_\_\_

Names:

Previous 6 months gross \_\_\_\_\_

income:

**Select the types(s) of public assistance you are currently receiving:**

- Food Stamps
- TANF
- LEAP
- CCAP
- Section 8 Housing
- Free and reduced lunch (family)
- Refugee Cash Assistance
- Supplemental Security Income
- (SSI) Pell Grant
- None of the above

TANF Case Manager & Number (if applicable) \_\_\_\_\_

- Are you homeless?
  - Have you ever been in foster care?
  - Are you a New American?
  - Do you have a cultural barrier?
  - Are you an offender/justice involved?
  - Are you basic skills deficient?
  - Are you digital skills deficient?
  - Are you an English Language Learner (ELL)?
  - Are you a migrant or seasonal farm worker?
  - Are you currently employed?
- If yes, how long have you been employed?

6 Month Income amount:

Includes: Gross wages and tips, SSDI, Old-Age Survivors Benefits, alimony, retirement, regular monthly payments, interest, unemployment, child support, foster care payments, and grants.

### Dislocated Worker Supplemental Data

- Layoff notice received  
Occupation if dislocation  
Last day on the job Employer of Dislocation

### Young Adult (Ages 16-24) Employment Challenges

What challenges may prevent you from completing your goals? (Select all that apply.)

- Pregnant of Parenting  
 In Foster Care (or have been)  
 Did not complete high school/GED

### In-School Young Adults (16-24)

What challenges may prevent you from completing your goals? (Select all that apply.)

- Pregnant of Parenting  
 In Foster Care (or have been)  
 Did not complete high school/GED

## Please complete the In-School Young Adult (16-24) Questionnaire.

### General Information

SSN

Full Name

Date of Birth

Age

Street Address

City

State

ZIP

Email

Home Phone

Cell Phone

**Unemployment Insurance**

- Current Claimant
- Not a Claimant
- Exhausted

- American Indian or Alaska Native
- Asian
- Caucasian
- Hispanic/Latino
- Native Hawaiian or Other Pacific Islander
- Other

**Selective Service Registration**

- Registered Not
- Registered
- Exempt

- Registered Alien
- Refugee

**Family Status:**

Veteran Status  
 % rating if disabled)  
 Enlistment Date Discharge  
 Date

Are you currently enrolled or entering a DOL-registered apprenticeship program?

Name of School

Name of Program

**Follow-Up Contact**

This person must not live with you. This is a reliable person (a friend or relative) who will always know how to contact you if you move or change your phone number. This person does not need to live in El Paso County or Teller County.

Name

Relationship

Phone Number

Street Address

City

State

ZIP

## Transportation

Current method of reliable transportation:

Are you currently receiving transportation assistance.

Yes  No

## Safety

Is there anyone in your life that makes you feel unsafe?  
Have you been in a mentally or physically abuse relationship?


Do you have a restraining order against anyone?

If yes, what is their name?

## Legal History

- Have you ever been convicted of a crime?
- Have you ever been the victim of a crime?
- Are you required to register for a sex offense?
- Do you have any upcoming court dates or unresolved legal issues?
- Please explain:

## Work History

- Are you currently employed?
- Are you looking for employment?
- Have you even been employed in the food service industry?

What type of program are you interested in? (Check all that apply)

- Computers/Technology
- Culinary
- Construction
- Manufacturing

Company Name

City, State

Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Job Title/Occupation \_\_\_\_\_

Job Duties

Wages per hour \_\_\_\_\_ Hours per week \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Please explain

Company Name

City, State

Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Job Title/Occupation \_\_\_\_\_

Job Duties

Wages per hour \_\_\_\_\_ Hours per week \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Please explain

Why do you want to participate in our program?

When are you available to start?

## Student Commitments

As a student enrolled in the Skills Academy Vocational Center instructor-led, self-paced six-month course, I hereby commit to the following:

- I will attend class at least three times a week and actively participate in all aspects of the course, including lectures, discussions, and activities, to maximize my learning experience.
- I prioritize my education by dedicating time to study, seeking help when needed, and continuously striving to improve my academics.
- I am devoted to my vocational training, actively engaging in hands on learning experiences and preparing myself for success in my chosen career.
- I will engage with my fellow students and instructors in a respectful and collaborative manner, fostering an inclusive and supportive learning environment.
- I will remain adaptable and resilient in the face of challenges, setbacks, and changes, recognizing them as opportunities for learning and growth.

By signing below, I affirm my commitment to these principles and pledge to uphold them throughout the duration of the course.

Date

Signature

**SUBMIT**