Alderman's Name: _____

CITY OF YAZOO CITY
2019 Summer Youth
Employment Program

DATE: _____

(PLEASE PRINT CLEARLY)

NAME OF APPLICANT: _____
LAST FIRST MI

ADDRESS: _____
STREET CITY STATE ZIP

TELEPHONE: (Home)_____ **(Cell)** _____

AGE: _____ **DATE OF BIRTH**: _____

SCHOOL YOU PRESENTLY ATTEND AND GRADE LEVEL:

_____

HAVE YOU WORKED THE SUMMER PROGRAM BEFORE? YES / NO (*circle one*)

IF SO, HOW OFTEN? _____

PARENT/GUARDIAN:

NAME: _____

ADDRESS: _____
STREET CITY ST ZIP

EMERGENCY CONTACT #: _____

You **must** bring the following items when you submit your application:

- ✓ Birth Certificate
- ✓ Social Security Card
- ✓ Driver's license, School ID or State Issued Photo ID

Do Not Write Below This Line – For Office Use Only by Yazoo City Hall Employee

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Completed Application Received by: _____ ***Date:*** _____