

Join our crew...change your life.



Enroll in the Young Adult Conservation Corps!

To learn more about
advancing your career with the

Young Adult
Conservation Corps

contact Keith at
keithw@treetrust.org
or 612.590.3655.

As a participant you will:

- ✓ **Get paid.** Earn \$7.25 an hour to start, and work 39 hours per week during this 3+ month program.
- ✓ **Get trained** in the areas of safety and property maintenance.
- ✓ **Gain job skills** while working on real projects like:
 - Lawn mowing and snow shoveling
 - Tree care and removal
 - Plant care and installation
 - Boardwalks and timber staircases
 - Block and timber retaining walls
- ✓ **Learn** the art of job seeking.
 - Practice creating a resume
 - Learn how to complete job applications
 - Improve your interviewing skills
 - Get individualized help finding your next job

To participate you must be:

- ✓ Between the ages of 17 and 21 (limited positions available for 22-24)
- ✓ From a low-income household and living in Hennepin County
- ✓ Eligible to work in the US

Send a completed application to:

Fax: 952.767.3650
or Mail: Tree Trust
2231 Edgewood Avenue South
St. Louis Park, MN 55426



www.treetrust.org

Chart of Total Household Income

Family Member Name	Age	Relationship to You	Type of Income	Total Received in Last 6 Months
<i>Example: Joe Joseph</i>	<i>25</i>	<i>Brother</i>	<i>Wages</i>	<i>\$250/month = 6 x 250 = \$1500</i>

6. Total all incomes listed and write your household's income for the last 6 months here: \$ _____

EMPLOYMENT INFORMATION – Please provide the following information about your last two jobs.

JOB 1 (most recent) - If you have **NOT had a job, write "N/A".**

Name of the Company: _____ Your Job Title: _____

Company's Address (Including City and State): _____

Start Date: _____ End Date: _____ Hourly Wage: _____ Hours Worked Per Week: _____

Duties: _____

Reason for Leaving Position: _____

JOB 2 - If you have **NOT had a job, write "N/A".**

Name of the Company: _____ Your Job Title: _____

Company's Address (Including City and State): _____

Start Date: _____ End Date: _____ Hourly Wage: _____ Hours Worked Per Week: _____

Duties: _____

Reason for Leaving Position: _____

SUPPLEMENTAL QUESTIONS – Please clearly write your answers to the below questions. If you need extra space, please attach a separate piece of paper with your answers.

1. What do you want to gain from participating in Tree Trust's Young Adult Conservation Corps (YACC)?

2. Like many jobs, we work closely with other team members and different groups. How would you benefit and mesh with our diverse team?

3. We work in all outdoor conditions that can be challenging even for experienced staff. In what ways are you prepared to handle this (previous work experience, love of the outdoors, etc.)?

USE OF YOUR DATA — We may use the information from your application and your participation in the program in some ways. This section explains who might receive this information and what will happen if you choose not to provide it.

I. Program Information

- A. We are asking for the information to help us decide whether you are eligible for the program and if there are other services you may need or want.
- B. We may use the info to prepare reports, conduct audits, review eligibility, and find out how the program is helping you.
- C. We may share this info with staff of the government agencies who fund the program, including the Minnesota Department of Employment and Economic Development (DEED), as well as with other federal, state and local government agencies.
- D. You are not required to provide the information; however, if you do not provide the information requested, we may not be able to determine if you are eligible for the program, and thus may not be able to serve you.
- E. Providing false information will lead to removal from the program.

II. Wage Detail Files

We also may use the information from wage records to help us evaluate the program.

APPLICANT STATEMENT

- I have read this application, and the information provided is accurate and complete to the best of my knowledge.
- If requested, I agree to provide any documentation necessary to verify the information on this form.
- I give permission for my school to release test results and other information to Tree Trust as required to determine eligibility.
- I understand that completing this application does not guarantee my participation or enrollment in Tree Trust's Young Adult Conservation Corps.
- I understand that I am subject to immediate termination from Tree Trust's Young Adult Conservation Corps if I am found ineligible after enrollment, and that I may be prosecuted for fraud and/or perjury if I have intentionally falsified information on this application.

By signing below, you attest that you have read, understood, and agreed with the information and statements within this application.

Applicant Signature: _____ Date: _____

IF YOU ARE 17 YEARS OLD, YOUR PARENT OR GUARDIAN MUST ALSO READ, AGREE TO, AND SIGN BELOW IN ORDER FOR YOUR APPLICATION TO BE CONSIDERED COMPLETE.

PARENT PERMISSION STATEMENT

- I hereby give permission for my child to participate in Tree Trust's Young Adult Conservation Corps.
- I have read this application, and the information provided is accurate and complete to the best of my knowledge.
- If requested, I agree to provide any documentation necessary to verify the information on this form.
- I give my permission to my child's school to release test results and other information to Tree Trust as required to determine eligibility.
- I understand that completing this application does not guarantee my child's participation or enrollment in Tree Trust's Young Adult Conservation Corps.
- I understand that my child is subject to immediate termination from Tree Trust's Young Adult Conservation Corps if she/he is found ineligible after enrollment, and that my child and/or I may be prosecuted for fraud and/or perjury if my child and/or I have intentionally falsified information on this application.

By signing below, you attest that you have read, understood, and agreed with the information and statements within this application. Both the applicant and parent must sign below.

Applicant Name (Print): _____ Date: _____

Applicant Signature: _____

Parent/Guardian Name (Print): _____ Date: _____

Parent/Guardian Signature: _____