

Wisconsin Youth Apprenticeship Program

Rock and Green County School-to-Work Partnership

Student Application Portfolio



DIRECTIONS FOR COMPLETING APPLICATION PORTFOLIO

Students interested in participating in a Youth Apprenticeship Program should complete and submit an Application Portfolio to your local school-based coordinator or high school counselor.

A complete Application Portfolio consists of the following:

1. Student Application Form, Commitment Form, Parent/Guardian Information (all included in packet)
2. A cover letter that addresses the following questions:
 - a. Why do you want to be a Youth Apprentice?
 - b. How do your career interests relate to the apprenticeship program for which you are applying?
 - c. What courses have you taken and are you planning to take that relate to the apprenticeship program for which you are applying?
 - d. Why do you think you should be considered as an apprentice?
3. A resume which includes:
 - a. Any courses or training you have completed that support your qualifications for the YA program.
 - b. Extra-curricular activities
 - c. Any previous/current employment information
 - d. Volunteer experiences
4. Two recommendations (included in packet)
 - a. One from within a school setting (i.e. teacher, coach)
 - b. One from an individual in the community (i.e. employer, volunteer coordinator,)
 - c. A relative should only fill out a form if that relative has supervised you in a paid, work setting.

For more information go to:
www.dwd.wisconsin.gov/youthapprenticeship
Or e-mail: ddealwis@blackhawk.edu



Student Application Form

Background Information

Student Name: _____

Address: _____

City/State: _____ Zip: _____

Phone: _____ Cell Phone: _____

E-mail: _____ Birthdate: _____

Gender: _____ Race: _____

High School Attending: _____

Graduation Date: _____ Current Grade: _____

Social Security Number: _____ Current GPA: _____

Please indicate the years you are interested in participating in the Youth Apprenticeship Program:

Junior Year Only Senior Year Only Junior and Senior Year

Please indicate the Youth Apprenticeship program that matches your career interest:

Check out example jobs in each program area at blackhawk.edu/HighSchoolConnection/YouthApprenticeship.aspx

- Agriculture, Food and Natural Resources
- Architecture and Construction
- Arts, A/V Technology and Communications
- Business Management and Administration
- Finance
- Health Services
- Hospitality, Lodging and Tourism
- Human Services
- Information Technology (IT)
- Manufacturing
- Marketing



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Youth Apprenticeship

- ___ Science, Technology, Engineering, and Math (STEM)
- ___ Transportation, Distribution and Logistics

Student Signature: _____ **Date:** _____

High School Youth Apprenticeship Coordinator Only:

IEP Y / N At Risk Y / N Currently Emp Y / N



Student Commitment Form

As a Youth Apprentice, I agree to:

- Maintain the academic and attendance requirements required by the Youth Apprenticeship program, my high school, Blackhawk Technical College, and my work site.
- Observe all school and company rules and other requirements identified by my instructors and my employer/mentor.
- Participate in progress reviews scheduled with work site mentors, school personnel and my parent(s)/guardian(s).

As a Youth Apprentice, I understand the following:

- I will need to seek my own employment. The Rock County School-to-Work Partnership and my high school may assist me but cannot guarantee employment.
- The YA program requires a time commitment beyond that of a typical high school student. I must complete 450 works hours during the year, which means that I might average 10-15 hours per week of work during the school year and more time during the summer.
- I will be asked to provide my employer with specific hours and days that I am available to work and that timely communication with my work site mentor regarding unplanned changes in my personal schedule is extremely important.
- If I should have any problems with my related instruction or my job site, I will notify my Youth Apprenticeship school-based coordinator of the situation immediately.

I certify that the facts contained in this application are true and complete to the best of my knowledge.

Student Signature: _____ Date: _____



Parent/Guardian Information

Student Name: _____

Parent/Guardian Name(s): _____

Address: _____

Phone: _____ Email: _____

Parent Certification and Release:

- Initial ____ I certify that the facts contained in the application are true and complete to the best of my knowledge.
- Initial ____ I authorize investigation of all statements contained herein and the references listed in this application and all information concerning previous employers.
- Initial ____ I understand that all tuition/fees/textbook costs for any college coursework at Blackhawk Technical College not covered by the school district or work site but required for my child during his/her apprenticeship will be my responsibility.
- Initial ____ I understand that a parent or guardian must attend, along with my child, any orientation session or meeting that may be required for the Youth Apprenticeship program.
- Initial ____ I authorize the release of transcripts of grades and attendance records.
- Initial ____ I authorize the Youth Apprenticeship Coordinator the use of written or oral testimonials and photographs and/or video or digital recordings with my child's image in Youth Apprenticeship publications and/or news releases.
- Initial ____ I understand that I am solely responsible for the transportation of the undersigned student to and/or from the classroom or work site and for all loss involved in said transportation.
- Initial ____ I certify that the student has a valid driver's license and adequate car insurance (necessary only if the student will be driving to an off-campus classroom or work site).

Parent/Guardian Signature: _____ Date: _____

*Please note: if you are concerned that the cost of items such as transportation or related instruction may limit your child's ability to complete this program there **may** be assistance available. Please contact your school's Youth Apprenticeship Coordinator for more information.*



Student Recommendation Form

Student Name: _____ School: _____

This student is applying for the _____ Youth Apprenticeship Program. In order to successfully evaluate this person's potential we would like you to complete this form and return to the person listed below.

No Basis for Judgment		Below Average	Average	Above Average	Excellent
	Quality of Work				
	Responsibility				
	Effort				
	Attitude				
	Honesty				
	Teamwork/ Cooperation				
	Work Habits (on time, reliable)				
	Problem Solving Skills				

Please provide any additional explanation or examples to support your ratings in the space below:

Name: _____ Relationship to Applicant: _____

Title/Business/School: _____

Signature: _____ Date: _____

Return this form to: YA School-Based Coordinator
or BTC/YA Specialist
6004 S County Rd. G
PO Box 5009
Janesville, WI 53547-5009



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