



SUMMER YOUTH WORK EXPERIENCE IS BACK FOR 2009!

Your “Recovery Act” Stimulus dollars working for you.

We appreciate your participation in teaching work related skills and encouraging young people to be dependable, punctual, and responsible.

Most participating youth will receive Work Ethics training to prepare them to be good employees.

The Job Council
1545 Harbeck Road
Grants Pass, OR 97527
www.jobcouncil.org

The Job Council is an equal opportunity employer and operates equal opportunity programs. Auxiliary aids and services are available upon request to individuals with disabilities.

3/23/09

We are planning a 2009 Summer Youth Employment and Training Program. Our program supports work experience opportunities to eligible youth (14–24) during June through the end of August. The program offers at least 20 hours of work per week for up to 8 weeks for each participant. The Job Council will be the employer of record and responsible for payroll activities and workers' compensation insurance; we count on you to provide training and positive role models for these young people.

Youth placements will be based on each participant's interests, skills, and location. Prior to placement you will have the opportunity to interview interested youth and make training placement decisions. A Job Council employment specialist will work with you and the youth throughout the summer to facilitate a positive experience for all.

The number of youth we are able to place is limited based on our funding. We cannot guarantee that your work experience requests will be met.

◆ Please complete the attached request form for work experience participants. Mail to The Job Council, 1545 Harbeck Rd., Grants Pass, OR 97527 by May 30, 2009.

Thank you for your interest and willingness to give your time. We look forward to working with you.

Attention: Danielle Ring
Phone: 541-244-3244
Email: danieller@jobcouncil.org
Fax: 541-476-1180





REQUEST FORM - FOR SUMMER WORK EXPERIENCE PARTICIPANT(S)

PLEASE SUBMIT A SEPARATE REQUEST FOR EACH JOB TITLE

You may copy this form

This request does not guarantee a placement

Name of Organization: _____

Mailing Address: _____

Contact Person: _____ Phone # _____

Other Contact: _____ Phone # _____

E-mail: _____ Fax # _____

Work Experience Position Title: _____

Person(s) to Supervise Participant: _____ Phone # _____

Back-up Supervisor: _____

Worksite Street Address: _____ Phone # _____

Number of Youth Requested For This Position: _____

Brief job description, including any tools or equipment to be used or special requirements (e.g., age, specific hours or days, etc.): _____

Please print name of person
submitting this request

Title

Date



Attn: Danielle Ring
1545 Harbeck Road
Grants Pass, OR 97527
Phone: 541-244-3244
Email: danieller@jobcouncil.org
www.jobcouncil.org
Fax: 541-476-1180

For Job Council Use Only

Site Code #: _____

SOC #: _____

NAICS #: _____

SAIF Code #: _____