



PY 09-10 Year Round Enrollment Checklist

The purpose of this checklist is to assist providers with tracking the collection and submission of Eligibility and Enrollment forms.

Last Name: _____

First Name: _____

SS # - XXX-XX- _____

Date of Birth: ____/____/____

Program Start Date: ____/____/____

C. Code: Y _____

Enrollment Forms
<input type="checkbox"/> Completed Application
<input type="checkbox"/> Buckley Amendment
<input type="checkbox"/> Photo Waiver & Release
<input type="checkbox"/> Income Calculation Sheet
<input type="checkbox"/> TABE Pre-Test
Required only for Wage Payments
<input type="checkbox"/> W-4
<input type="checkbox"/> I-9
<input type="checkbox"/> Work Permit

Eligibility Requirements – Proof must be attached (Please refer to the PYN approved Source Documentation List)		
1. Birth Certificate	5. Fed/State/Gov ID	9. I-9 List B and List C document
2. Social Security Card	6. Passport	10. Application (Self-Attestation)
3. School ID	7. Social Service Record	11. Internet Registration Print-out
4. School Records	8. I-9 List A Document	12. Other
Eligibility Area	Source Documentation (circle the number of the document source you are submitting to PYN)	
<input type="checkbox"/> Social Security Number	2	7 12
<input type="checkbox"/> Philadelphia Residency	3	4 5 7 12
<input type="checkbox"/> School Status (ISY or OSY)	3	4 10 12
<input type="checkbox"/> Citizenship or Eligible to Work	1	2 3 4 5 6 7 8 9 12
<input type="checkbox"/> ID/Age	1	3 4 5 6 7 12
<input type="checkbox"/> Selective Service, if applicable	11	12

Income Verification – Proof must be attached		
Low Income – (This list of income sources doesn't require verification of Family Size)	Calculated Income – (This list of income sources requires calculation and verification of family size)	Proof of Family Size
<input type="checkbox"/> Proof of Receiving Cash Public Assistance <input type="checkbox"/> Proof of Receiving Food Stamps <input type="checkbox"/> Proof of Homeless <input type="checkbox"/> Proof of Supported Foster Child <input type="checkbox"/> Proof of Individual with a Disability <input type="checkbox"/> Proof of Individual receiving SSI	<input type="checkbox"/> Paystub(s) <input type="checkbox"/> Employer Statement <input type="checkbox"/> Compensation Award Letter or Printout <input type="checkbox"/> Social Security Benefits <input type="checkbox"/> Housing Authority Verification <input type="checkbox"/> Other	<input type="checkbox"/> Birth Certificate(s) <input type="checkbox"/> Landlord Statement <input type="checkbox"/> Lease <input type="checkbox"/> Medical Card(s)

Barrier: All WIA eligible youth must met one or more of the barrier. Please review each barrier category and use the characteristics to select the appropriate choice. At least one barrier must be met and proof of barrier must be provided.
 *(Refer to the PYN approved Source Documentation List)

<input type="checkbox"/> Youth Offender <input type="checkbox"/> Letter from Probation Officer <input type="checkbox"/> Court Documents	<input type="checkbox"/> Pregnant/ Parenting Youth <input type="checkbox"/> Child's Birth Certificate <input type="checkbox"/> Doctor's note confirming pregnancy	<input type="checkbox"/> Homeless and/or Runaway <input type="checkbox"/> Written statement from Social Service Agency <input type="checkbox"/> Written statement form Shelter
<input type="checkbox"/> School Drop Out <input type="checkbox"/> Attendance Record <input type="checkbox"/> Dropout letter	<input type="checkbox"/> Basic Skills Deficiency <input type="checkbox"/> TABE Test <input type="checkbox"/> School Record/Report Card or PSSA	<input type="checkbox"/> Foster Care <input type="checkbox"/> Written Statement from State/Local Agency <input type="checkbox"/> Verification of Payments made on behalf of child

Requires Additional Assistance - Youth needing additional assistance to complete an educational program or to secure and hold employment

Disabled Youth or **Non-Disabled Youth**

- Youth indicated that they never worked on the application
- Youth's last date of work is greater than 6 months prior to the application date
- Has never held full-time job for more 12 consecutive weeks by indicating on application they have worked less than 35+ hours and less than 12 weeks.
- Does the youth reside in a Blueprint neighborhood: Cobbs Creek, Elmwood, Fairhill, Frankford, Kingsessing, Overbrook, Point Breeze, Richmond or West Kensington (19122, 19124, 19125, 19127, 19129, 19131, 19133, 19134, 19137, 19139, 19143, 19144, 19145, 19146, 19151, and 19153)?
- Does the youth attend a Persistently Dangerous School (Anna H. Shaw Middle School, Edison High School, Edwin H. Vare Middle School, Eliz D. Gillespie Middle School, Fareira Skills, Frankford High School, Germantown High School, John B Stetson Middle School, John P. Turner Middle School, Lincoln High School, Martin Luther King High School, Olney High School, Overbrook High School, Roberts Vaux Middle School, Roberto Clemente Middle School, Samuel Fells high School; South Philadelphia High School, Strawberry Mansion High School, Thomas Fitzsimons High School, William Penn High School, and West Philadelphia High School)
- Is there evidence of a Project U-Turn early indicator: High truancy (80% or less attendance)
- Has the youth earned fewer than 5 credits
- Does the youth have a grade of C or lower in any subject?
- Does the youth indicate that they are behind a grade level on the application?

Applicant Signature: _____

Date: ____/____/____

Certifier Signature: _____

Date: ____/____/____