



**BAY AREA**



Collaborating With

# Application Process and Forms

**Admissions materials to be submitted:**

Follow instructions and use forms in this booklet

- Application form
- Budget plan (See page 8)
- Personal statement/essay question (two typed double-spaced pages, see page 13)
- Documentation of identification and legal right to work (see page 4 for details)
- High school diploma or GED
- One official transcript in sealed envelope
- Two additional references
- Recommendation form

**Program Start Date: March 6, 2012  
APPLY NOW!**

Year Up San Francisco Bay Area  
210 Spear Street  
San Francisco, CA 94105  
Phone: 415-512-7588  
fax: 415-512-7950  
[www.yearup.org](http://www.yearup.org)

# Admission Requirements

Dear Applicant:

Thank you for your interest in Year Up! We provide ambitious high school graduates and GED recipients from low to moderate-income families with an opportunity to pursue business and computer training and earn college credits. After successful completion of the first five months of the Year Up program, you will have an opportunity to work as an intern in a corporate setting for six months. This will help you prepare for future jobs and further education. While enrolled in the Year Up program, participants are earning an educational stipend of up to \$150-\$250/week.

This packet explains what is required of you throughout the admissions process and how to contact us for additional help. An application and other forms are also included. Please fill out this application carefully; make sure you answer all questions completely.

If you have any questions, please contact us and we'll be happy to answer them. We welcome you to the admissions process and look forward to receiving your application!

Best regards,  
The Year Up Bay Area Staff

## Visit the Year Up Website for More Information

Please visit our web site for more information about our program: [www.yearup.org](http://www.yearup.org).

## Like us on Facebook:

[Facebook.com/YearUpBayArea](https://www.facebook.com/YearUpBayArea)

## How to Contact Us

If you have any questions about the admissions process, application, or the Year Up program in general, please contact us by email at: [sfbayadmissions@yearup.org](mailto:sfbayadmissions@yearup.org) or by telephone at 415-512-7588 x3504.

## Year Up Requirements

### You Must:

- Be 18-24 years of age
- Have a high school diploma or GED certificate by the time you start the program
- Live in the Bay Area
- Be a U.S. citizen, permanent resident, or have an employment authorization card
- Demonstrate ambition, commitment, and interest in technology

### Practical Requirements

- Be responsible for your own transportation (public or private) to our Year Up location in downtown San Francisco and to an internship site in the San Francisco Bay Area
- Be available five days each week (Monday - Friday 8:30 a.m. - 3:30 p.m.; internship hours are normal business hours) for the full year of the program
- Be responsible to arrange day care for your children

### Admissions Deadlines

The Year Up program begins in March and in September. Application materials are accepted on a rolling admissions basis until each class is filled.

Late applications may be deferred until the next term.

The Year Up admissions process includes 3 required steps:

1. Application
2. First Interview
3. Learning Assessment

Candidates may be asked to participate in a Group Information Session or possibly a Second Interview

# Admissions Process and Materials

Please read all instructions carefully and complete all forms and materials fully.

## 1 Submit all application materials

**Application form** – Complete carefully and sign

- Personal statement/essay question**  
See instructions on application form page 13.
- Official transcripts** An official sealed high school or GED transcripts (forms provided)
- High school diploma or General Equivalency Diploma (GED)** Original form only
- Recommendation and additional references** See instructions on forms provided
- Documentation of identification and legal right to work**

**One of these documents:**

- U.S. passport
- Certificate of U.S. citizenship
- Certificate of naturalization
- Permanent resident card or alien
- Registration receipt card

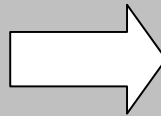
**OR One official picture ID:**

- Driver's license
- State I.D.
- U.S. military card
- Or non-U.S. passport

**AND one of these documents:**

- U.S. Social Security card
- U.S. birth certificate
- U.S. citizen card
- Certification of birth abroad issued by the U.S. Dept. of State
- ID card for use of resident citizen
- Unexpired employment authorization card

Please deliver or mail your application and other materials in a single large envelope with the correct amount of postage to:



**YEAR UP - ADMISSIONS  
210 SPEAR STREET  
SAN FRANCISCO, CA 94105**

**\*All application materials become part of a permanent record, are the property of Year Up, and are not returnable.**

**2 Interviews** will be scheduled for qualified candidates. Year Up will contact candidates to arrange interviews.

**3 A learning assessment** will be administered at Year Up to evaluate your reading comprehension and basic writing/problem solving skills.

**4 Year Up will notify applicants of acceptance, after completion of the admissions process.**



# Application

Please PRINT CLEARLY and fill out COMPLETELY  
Use black or blue pen

Date of application (MM/DD/YY): \_\_\_ / \_\_\_ / \_\_\_

Desired entry date:  Fall  Spring of Year \_\_\_\_\_

## Personal information

First name _____		Middle name _____	
Last name _____		Maiden/Former name _____	
Address _____			Apt #: _____
City _____		State _____	Zip _____
Home phone (____) _____		Cell phone/Pager (____) _____	
Work phone (____) _____		Email _____	
Date of birth (MM/DD/YY) ___ / ___ / ___		Gender: <input type="radio"/> F <input type="radio"/> M	Social Security number: _____ - _____ - _____
(Circle one)			
If you wish to be identified as a member of any of the following groups, please check one			
<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/> Native American	<input type="checkbox"/> Black, non-Hispanic	
<input type="checkbox"/> White, non-Hispanic	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Other, what? _____	
Are you <b>legally permitted to work in the U.S.</b> ? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If you are a U.S. permanent resident, please enclose photocopies of your alien registration card (both sides)</i>			
If your current permission to work in the U.S. will expire, please indicate when. _____			
Please describe any conditions that would cause your right to work in the U.S. to be revoked. _____			
_____			

## Documentation of identification and legal right to work *Please enclose photocopies of the following:*

### ONE of these documents

- U.S. passport
- Certificate of U.S. citizenship
- Certificate of naturalization
- Permanent resident card  
or alien registration receipt card

# OR

### ONE official Photo ID:

- Driver's license
- U.S. military card
- State ID
- Non-U.S. passport

### AND 1 of these documents

- U.S. Social Security card
- U.S. birth certificate
- U.S. citizen card
- Certification of birth abroad issued by the U.S. Dept of State
- ID card for use of resident citizen
- Unexpired employment authorization card

**Education**  
**High School/GED**

Have you received or will you receive any of the following diplomas?  
 High school diploma       GED certificate

What is the name of your high school or your GED program? \_\_\_\_\_

What is your actual or expected graduation date? (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

**Undergraduate Study (If any, official transcripts required)** *(If you have attended more colleges, please ask a staff person for another Undergraduate Study sheet)*

Have you ever taken college classes?     Yes     No

If yes, for each college attended, state name of college, type of program or your concentration, degree received, dates attended, and number of credits earned, if applicable:

**College / Institution 1:** \_\_\_\_\_ **Program / Concentration:** \_\_\_\_\_

Type of degree:     Associate's     Bachelor's     Master's     PhD

When did you attend? Start Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_      End Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

Degree earned:     Associate's     Bachelor's     Master's     None      Number of credits earned: \_\_\_\_\_

**College / Institution 2:** \_\_\_\_\_ **Program / Concentration:** \_\_\_\_\_

Type of degree:     Associate's     Bachelor's     Master's     PhD

When did you attend? Start Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_      End Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

Degree earned:     Associate's     Bachelor's     Master's     None      Number of credits earned: \_\_\_\_\_

**Training / Certifications** *(If you have attended more programs, please ask a staff person for another Training section sheet)*

Have you ever attended any technical, vocational, or job training programs?     Yes     No

If yes, for each program attended, answer the following:

**Name of Institution / Organization 1:** \_\_\_\_\_ **Program name:** \_\_\_\_\_

Type of program:  Certificate program       Education/Training program not resulting in certificate or degree

How long was the program (in Months)? \_\_\_\_\_ Did you complete the program?     Yes     No

When did you attend? Start Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_      End Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

Did you earn a certificate?       Yes     No    If yes, what type of certificate did you earn? \_\_\_\_\_

Did the program teach a job skill?     Yes     No    If yes, what type of job skill did you learn? \_\_\_\_\_

**Name of Institution / Organization 1:** \_\_\_\_\_ **Program name:** \_\_\_\_\_

Type of program:  Certificate program       Education/Training program not resulting in certificate or degree

How long was the program (in Months)? \_\_\_\_\_ Did you complete the program?     Yes     No

When did you attend? Start Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_      End Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

Did you earn a certificate?       Yes     No    If yes, what type of certificate did you earn? \_\_\_\_\_

Did the program teach a job skill?     Yes     No    If yes, what type of job skill did you learn? \_\_\_\_\_

## Employment History

Please answer the following questions about the longest paid job you have ever had. This includes full-time or part-time regular jobs, odd jobs such as painting, repair work, babysitting, or hairdressing, temporary jobs or any other jobs at which you worked at least 10 hours during any single month.

### Longest Job

What is the name of the organization or the person for whom you worked? \_\_\_\_\_

What kind of work did you do at this job? \_\_\_\_\_

How long did you work at this job? *Please circle appropriate duration* \_\_\_\_\_ days / weeks / months / years

What was your ... Start Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_ End Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

Number of hours usually worked per week \_\_\_\_\_ Number of weeks usually worked per month \_\_\_\_\_

Hourly wage (before taxes) when you first **started** working at this job \$ \_\_\_\_\_

Current Hourly wage (before taxes) or wage when you **stopped** working at this job \$ \_\_\_\_\_

Was medical insurance offered?  Yes  No

Are you currently working at this job?  Yes  No

The following sections are about paid work you have done during the past 12 months including any jobs you have now. Please answer the questions for each job you had during the past 12 months. Please include all full-time or part-time regular jobs, odd jobs such as painting, repair work, babysitting, or hairdressing, temporary jobs or any other jobs at which you worked at least 10 hours during any single month.

**Note:** If one of the jobs you had during the past 12 months was the longest job you ever had that you described above, you do NOT need to answer these questions for that job again. Only answer the questions for the other jobs you had during the past 12 months that were NOT the longest job.

### Most recent job during the past 12 months

What is the name of the organization or the person for whom you worked? \_\_\_\_\_

What kind of work did you do at this job? \_\_\_\_\_

How long did you work at this job? *Please circle appropriate duration* \_\_\_\_\_ days / weeks / months / years

What was your ... Start Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_ End Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

Number of hours usually worked per week \_\_\_\_\_ Number of weeks usually worked per month \_\_\_\_\_

Hourly wage (before taxes) when you first **started** working at this job \$ \_\_\_\_\_

Current Hourly wage (before taxes) or wage when you **stopped** working at this job \$ \_\_\_\_\_

Was medical insurance offered?  Yes  No

Are you currently working at this job?  Yes  No

**Second most recent job during the past 12 months**

What is the name of the organization or the person for whom you worked? \_\_\_\_\_

What kind of work did you do at this job? \_\_\_\_\_

How long did you work at this job? *Please circle appropriate duration* \_\_\_\_\_ days / weeks / months / years

What was your ... Start Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_      End Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

Number of hours usually worked per week \_\_\_\_\_      Number of weeks usually worked per month \_\_\_\_\_

Hourly wage (before taxes) when you first **started** working at this job \$ \_\_\_\_\_

Current Hourly wage (before taxes) or wage when you **stopped** working at this job    \$ \_\_\_\_\_

Was medical insurance offered?  Yes  No

Are you currently working at this job?  Yes  No

**Third most recent job during the past 12 months**

What is the name of the organization or the person for whom you worked? \_\_\_\_\_

What kind of work did you do at this job? \_\_\_\_\_

How long did you work at this job? *Please circle appropriate duration* \_\_\_\_\_ days / weeks / months / years

What was your ... Start Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_      End Date: (MM/DD/YY) \_\_\_ / \_\_\_ / \_\_\_

Number of hours usually worked per week \_\_\_\_\_      Number of weeks usually worked per month \_\_\_\_\_

Hourly wage (before taxes) when you first **started** working at this job \$ \_\_\_\_\_

Current Hourly wage (before taxes) or wage when you **stopped** working at this job    \$ \_\_\_\_\_

Was medical insurance offered?  Yes  No

Are you currently working at this job?  Yes  No

**If you had another job during the past 12 months, please ask a staff person for another Employment History sheet**

## Creating a Personal Budget

Please complete the budget form below, which will be discussed during your interview.

Income	Monthly	Expenses	Monthly
Full Time Job		Rent/Mortgage	
Part Time Job		Public Transportation	
Other employment		Food/Groceries	
Spouse's Job FT+PT		Childcare/School	
<b>Government Benefits</b>		Phone (cell and land line)	
TANF/ CaWORKS		Car payment	
Food Stamps		Electricity	
Veteran's Benefits		Water	
SSI/SSD		Child support/alimony	
Housing Assistance (Sec. 8)		Cable/Internet	
Unemployment		Credit Cards debt	
Child support/alimony		Loans	
Other		Entertainment	
		Clothes	
		Other	
		Gas for car	
		Child support/alimony	
		Medical Insurance	
<b>Total Income</b>	\$	<b>Total Expenses</b>	\$

1. Add up your monthly income

a. **TOTAL MONTHLY INCOME** \$ \_\_\_\_\_

2. Add up your monthly expenses \$ \_\_\_\_\_

b. **TOTAL MONTHLY EXPENSES** \$ \_\_\_\_\_

3. Subtract your **TOTAL MONTHLY EXPENSES** from your **TOTAL MONTHLY INCOME** to determine your cash gap

c. **TOTAL CASH GAP** \$ \_\_\_\_\_

**(Please note: A negative CASH GAP may require additional financial planning as your expenses may out weigh your income.)**

3. **The Budget Plan:** Below, please describe your plan to participate fully in the Year Up program, having thought through any financial pressures and addressing the potential "Cash Gap".

## **Personal and household information for Year Up**

How many people live in your household? \_\_\_\_\_

Are you the head of your household?  Yes  No

Not counting yourself, how many adults ages 18 or older live with you? \_\_\_\_\_

Do any of the adults ages 18 or older who live with you have a physical or mental health problem that keeps them from doing regular activities like walking or getting dressed?

Yes  No If yes, are you responsible for this person's care?  Yes  No

Do you have a physical, mental, or other health condition that we need to know about in order to accommodate you?

Yes  No

*Year Up does not discriminate on the basis of disability. If you have an Individual Education Program (IEP), Year Up will work with you to implement it at Year Up to the extent it is reasonable to do so.*

What type of health insurance do you have for yourself?

None  Medicaid  Private/other insurance, what? \_\_\_\_\_

Do you have any children?  Yes  No *If yes, please answer the following questions. If no, please continue to the next section*

How many children do you have? \_\_\_\_\_

How many of your children live with you? \_\_\_\_\_

If your children live with you, what full-time day-care options do you have available for them? *(Please check all that apply)*

- Child enrolled in a day care center  Child enrolled in head start  
 Relative or non-relative cares for child in my home  Child enrolled in a before and after school care program  
 Relative or non-relative cares for child in her/his home  
 Other: \_\_\_\_\_  
 None or not sure

Do you have a child support order issued by the court or child support agency that requires you to pay child support for any of your children?  Yes  No

What type of health insurance do you have for your children?

- Children don't live with me  None  
 Medicaid  Child or Family Health Plus Insurance  
 Private/other insurance, what? \_\_\_\_\_

What is your current living situation? *(Please check only one answer)*

- Own my own house  Rent a house or apartment  
 Live with someone else and pay rent  Live with someone else and do not pay rent  
 Live in a shelter, halfway house or other group housing  Currently homeless

Do you live in:  Public Housing  Subsidized Housing  Section 8

Do you currently live with:  Parent/Legal guardian  Alone  Other: \_\_\_\_\_

How many times have you moved during the past two years? \_\_\_\_\_

How long does it take you to walk to the nearest bus or train stop from where you live? \_\_\_\_\_

Do you have a valid driver's license? *Valid means NOT suspended or expired*

Yes  No

Do you have a vehicle that you can use every day?  Yes  No

**Personal and household information for Year Up, continued**

Are you currently receiving government assistance?  Yes  No *If yes, please specify below:*

WIC	<input type="checkbox"/> Yes <input type="checkbox"/> No	Unemployment insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No
Safety Net	<input type="checkbox"/> Yes <input type="checkbox"/> No	TANF (Temporary Assistance for Needy Families)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Food Stamps	<input type="checkbox"/> Yes <input type="checkbox"/> No	Supplemental Security Income, Aid to the Disabled	<input type="checkbox"/> Yes <input type="checkbox"/> No
Veteran's benefits	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other: _____	

Are you currently receiving any of the following forms of assistance?

Child support	<input type="checkbox"/> Yes <input type="checkbox"/> No	Income or other support from family or spouse/partner	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Other: \_\_\_\_\_

What is your personal annual income? \_\_\_\_\_

What is your household income? \_\_\_\_\_

**Conviction and Rehabilitation Record**

Conviction of a crime, which includes a guilty plea to a criminal charge, will not necessarily disqualify you from admission to the program. Year Up will consider several factors, including the degree to which the conviction relates to the program's duties and responsibilities, the time elapsed since the conviction, the gravity of the offense, and evidence demonstrating rehabilitation.

Have you been convicted of a crime in the last 7 years?

Yes  No

If yes, list convictions that are matter of public record (arrest are not convictions). A conviction will not necessary disqualify you from the Year Up program.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Further information (optional)**

You may attach a separate resume with any additional information that might help us evaluate your qualifications (e.g., special projects or recognition, description of schooling – especially if interrupted).

## Contact Information

Complete the following contact information for four relatives, friends, or other people you know who **do not** live with you and who are likely to know where to find you two years from now. Please list people at **different** addresses.

### Contact #1

First name \_\_\_\_\_ Middle initial \_\_\_\_\_ Last name \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (\_\_\_\_) \_\_\_\_\_ Whose name is phone listed under? \_\_\_\_\_

Work phone (\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

### Contact #2

First name \_\_\_\_\_ Middle initial \_\_\_\_\_ Last name \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (\_\_\_\_) \_\_\_\_\_ Whose name is phone listed under? \_\_\_\_\_

Work phone (\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

### Contact #3

First name \_\_\_\_\_ Middle initial \_\_\_\_\_ Last name \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (\_\_\_\_) \_\_\_\_\_ Whose name is phone listed under? \_\_\_\_\_

Work phone (\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

### Contact #4

First name \_\_\_\_\_ Middle initial \_\_\_\_\_ Last name \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (\_\_\_\_) \_\_\_\_\_ Whose name is phone listed under? \_\_\_\_\_

Work phone (\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

**Parent or guardian** For applicants under the age of 18, your parent or guardian must fill out the following:

Name (print) \_\_\_\_\_ Relationship \_\_\_\_\_

Home phone (\_\_\_\_\_) \_\_\_\_\_ Work phone (\_\_\_\_\_) \_\_\_\_\_

Home address \_\_\_\_\_ Apt. #: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I have reviewed this application and I authorize my son/daughter/legal ward to apply to Year Up.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Read carefully and sign**

**Equal Opportunity** All applicants will be given equal consideration. No question on this form will be used to screen out or discriminate against any candidate. Year Up does not discriminate on the basis of race, color, national origin, sex, age (except as necessary for the normal operation of the program or to meet a statutory objective), gender including gender identity, disability, sexual orientation, religion, marital status, veteran status, or any other characteristic protected by law.

**I certify** that I have read and understand the information in this application booklet and that the information I have supplied is true and complete to the best of my knowledge. Students found to have supplied false information will be denied admission or, if admitted, face immediate disenrollment.

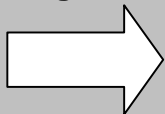
**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**DISCLAIMER**

Occasionally photos and videos are taken of classes and other activities to show others what they are like. I hereby give Year Up permission to use such images of myself in activities for public relations, marketing, and other purposes.

Signature \_\_\_\_\_

**Please DELIVER or MAIL your application and other materials in a single large envelope with the correct amount of postage to:**



**YEAR UP - ADMISSIONS  
210 SPEAR STREET  
SAN FRANCISCO, CA 94105**

**Personal statement / Essay question (REQUIRED; Attach to application)**

**Please respond to the essay question below on separate paper. Your response must be at least two typewritten, double-spaced pages, 12 pt., in paragraph form.**

**Essay Question:** *Why do you want to join Year Up and why do you believe you are a good candidate for Year Up? Briefly describe your experience and learning, including learning outside the classroom, such as employment, family, military, volunteer work, and participation in community organizations. Explain your reasons for further study, and personal and career goals. Your answer will be evaluated for content, grammar, spelling, and your ability to communicate and express your thoughts clearly and concisely.*



# Additional References (REQUIRED)

In addition to the recommendation form, please provide us with the names of two additional references who we can contact.

Examples of appropriate references include a teacher, guidance counselor, coach, clergy person, supervisor, mentor, or other adult in your community who knows you well enough to comment on your character and ability. (Family members and close friends are *not* acceptable references.)

Reference Name	Organization or Place of Employment	Phone Number & Email	Relationship to You
1.			
2.			



# Recommendation Form (*REQUIRED*)

**Instructions:** One recommendation is required from someone other than who was used as an additional reference. Please ask a teacher, guidance counselor, coach, clergy person, supervisor, mentor, or other adult in your community who knows you well enough to comment on your character to complete this recommendation (a family member or close friend is not acceptable).

Your name (applicant) \_\_\_\_\_

Recommender's name \_\_\_\_\_

Profession and title \_\_\_\_\_

Name of company, school or organization \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Recommender's phone number(s): work \_\_\_\_\_

Home \_\_\_\_\_ Mobile \_\_\_\_\_

**For the Recommender:**

*Please complete this form, seal it in an envelope, and sign across the seal. Return it to the Year Up applicant to be submitted with his/her application. The Recommendation Form is three pages total.*

Dear Recommender,

The young person named above is applying for a one-year educational and internship opportunity with Year Up. Year Up is a nonprofit organization that gives young adults the opportunity to learn technical and professional skills (first six months) and apply those skills in a professional setting through an internship with a corporate partner (second six months), while earning an educational stipend.

Candidates must show a tremendous amount of commitment, character, competency, and initiative throughout their one-year commitment. Your observations of the applicant's character, leadership ability, computer skills, and aptitude will play a role in determining the applicant's suitability for this program.

Please provide your recommendation through your answers to the questions below. You can use the space below and/or feel free to submit an attachment. Upon completion, this reference form should be sealed in an envelope with your signature written across the seal, and returned to the applicant to submit to Year Up.

Thank you for your time. Your input is important to us, and we look forward to hearing from you.

Sincerely,  
Year Up Admissions Team



6. Please evaluate the applicant in the following areas by marking the appropriate box below for each item.  
**Check only one.**

Skill or Quality	Strong "Yes" or Very Good	Okay or Average	Needs Work	Don't Know
Basic computer/PC skills				
Works well with peers				
Takes initiative / pro-active				
Demonstrates responsibility, follow-through, and commitment to task				
Conflict resolution skills				
Time management skills				
Leadership ability				
Demonstrates integrity				
Record of attendance and being on time				
Critical thinking and problem solving skills				
Reads and writes at or near high school graduate level				
Demonstrates age-appropriate maturity				
Positive attitude and overall disposition				

7. Please comment on any of the characteristics for which you gave the applicant a very high or low rating above.

**Recommender: please seal this form in an envelope, sign it across the seal, and give it to the applicant to submit to Year Up.**