

E.A.R.N. EMPLOYMENT PROGRAM –YOUTH FORM

The E.A.R.N. (Encourage Adolescent Responsibility Now) Employment Program connects you with Township residents who have registered to hire you to work at various tasks listed below. You must be 14-19 to apply. It will be the E.A.R.N. Coordinator's responsibility to put you in touch with the residents each time they request help. Upon return of this application, a copy will be sent to you as a reminder of what you signed up for, as well as guidelines for your involvement in E.A.R.N. Be sure to read the Waiver below, sign and date to complete the process.

Youth (First/Last Name): _____

Family Last Name if different than yours _____

Address: _____ City: _____ Zip: _____

Phone _____ Cell Phone _____ email address _____

Age: _____ Date of Birth: _____ Male Female School: _____

Nearest Major Intersection: _____

How did you hear about the E.A.R.N. Program? _____

Type of work you want to do: Please check one or more of the following:

- | | | |
|------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Yard Care | <input type="checkbox"/> Snow Removal | <input type="checkbox"/> Child Care |
| <input type="checkbox"/> Cleaning | <input type="checkbox"/> Painting | <input type="checkbox"/> Shopping |
| <input type="checkbox"/> Moving | <input type="checkbox"/> Computer Help | <input type="checkbox"/> Other _____ |

Would you be willing to do any odd jobs other than listed above? Yes No

WAIVER:

To the fullest extent allowed by law, we as the Youth Participant and Parent/Guardian, waive any right to recover from MAINE TOWNSHIP for any personal injury or property damage sustained as a result of participation in the E.A.R.N. Employment Program. I also acknowledge MAINE TOWNSHIP has the absolute right to refuse enrollment of any person in this program.

Youth Signature: _____ Date: _____

Note: Applicants under age 18, must have their parent/guardian's signature.

Parent/Guardian Signature: _____ Date: _____

Fill out and return to: Gloria Stepek, Coordinator E.A.R N. Program,
Maine Township, MaineStay Youth & Family Services
1700 Ballard Rd., Park Ridge, IL 60068
(847) 297-2510 email: gstepek@mainetown.com FAX: 847-297-5914