

2019 Youth Participation and Parental Permission Agreement

All youth under 18 at the time this application is submitted must have parent/guardian permission to participate in BrookLynk. The parent/guardian must read and complete all sections of this page.
If you are currently 18 or older, you must complete this form yourself.

ALL BLANKS MUST BE COMPLETED

Youth (Applicant) Name: _____ Phone: _____

Date of Birth: _____

If I am not selected for BrookLynk, I give BrookLynk permission to release my contact information to other youth employment service and program providers. Yes No

Parent/Guardian Name: _____ Phone: _____

Emergency Contact Name: _____ Phone: _____

BrookLynk youth attend classroom training, an intake session, and a mock interview prior to entering the applicant pool to be matched with a paid summer internship. It is our goal to help each youth gain as much as possible from each step in the process.

Will your child need help or special support during BrookLynk? If yes, please describe what kind of help or support they may need to gain the most from the experience and be successful.

Participant and Parent/Guardian Permission Statement

- I hereby give my permission for the BrookLynk Participant, either myself or my child, to participate in the BrookLynk Get Ready! work readiness training with possible employment.
- I understand that summer internship opportunities coordinated by BrookLynk are only open to students ages 16-21 who complete Get Ready! and live or attend school in Brooklyn Center or Brooklyn Park
- I understand that participants who complete Get Ready! training, but do not meet the eligibility criteria for summer internships, they are invited to BrookLynk's Youth Job Fair on Saturday, April 13 to pursue summer employment
- I understand that if a participant is selected for a summer internship opportunity, they will need to provide proof of work eligibility documents to BrookLynk and the hiring employer partner
- I understand that participants may be referred for employment to various non-city agencies or employers
- Although public transportation may be provided to the participant, I understand that BrookLynk will not supervise youth participants at those times.
- I voluntarily release BrookLynk, the City of Brooklyn Center, and the City of Brooklyn Park from any and all liability based on claimed negligence at times when the participant is not under the supervision of the aforementioned parties.
- I agree to provide, if requested, any documentation necessary to verify information on the BrookLynk Participant, either myself or my child's, application and I authorize BrookLynk or their providers to verify information provided, if necessary.
- I give my permission to Osseo Area School District, Anoka-Hennepin Area Schools, Brooklyn Center Community School District and/or Robbinsdale Area Schools or other educational institution to release educational records, test scores and other information of the BrookLynk Participant, either myself or my child, to BrookLynk, their contractors, researchers and partners as required for participation in BrookLynk and for research purposes, including educational records throughout the BrookLynk Participant's tenure at the school. This information will be used to determine longitudinal program impact.
- I give my permission to the BrookLynk Program to release BrookLynk Participant information and program data to entities serving BrookLynk students for the purposes of collaboration, research and/or funding.
- I agree that BrookLynk participants shall not claim any right to unemployment compensation resulting from any termination of employment or from any other event.
- I agree that the BrookLynk Participant, either myself or my child, may be interviewed, photographed and/or video recorded to promote BrookLynk, his or her employer, the City of Brooklyn Center, the City of Brooklyn Park, and its partners.
- I agree that the BrookLynk Participant, either myself or my child, may take part in program evaluations.
- If I have a complaint about this program, BrookLynk will assist in resolving it.

By signing below, I attest that I have read, understand, and agree with the information and statements within this application.

Youth Signature: _____ **Date:** _____

(Required)

Parent Signature: _____ **Date:** _____

(Required for youth under 18)

YOU MUST BRING THIS FILLED OUT AND
SIGNED PERMISSION FORM TO THE FIRST DAY
OF TRAINING.

THIS COMPLETED AND SIGNED FORM IS YOUR
“TICKET TO TRAINING”