



SUMMER INSTITUTE

We have excellent employment placement opportunities (up to 40 hours per week) for 250 youth (ages 14 -18 years old) to be placed in various locations throughout the City of Rochester.

Where: 57 St. Paul St., 12 pm • When: June 28 - July 30
Parent Orientation: June 21 • Youth Training: June 28 - July 30
Deadline to apply is June 18

Questions? Contact Ray Mayoliz at 585-820-8424 or email Raymond.Mayoliz@cityofrochester.gov

APPLICATION ON BACK!



DON'T MISS OUT!



SUMMER INSTITUTE



For Office Use Only

Date Received _____

Staff Initials _____

Instructions: Submit completed applications in person or by mail to: Department of Recreation & Human Services - MBK Summer Institute, 57 St. Paul Street, Rochester, NY 14604.

If you have any questions please call Mr. Ray Mayoliz @ 585-428-7938.

Personal Information

Name: _____ Gender M F Birth Date: ___/___/___
 Address: _____ City: _____ State: _____ Zip: _____
 School: _____ Grade: _____ Cell Phone: (____) _____
 Email: _____ Facebook Name: _____
 Instagram: _____ Twitter: _____ Other: _____
 Race: Black White Asian American Indian/Alaska Native Native Hawaiian/Pacific Islander Other
 Hispanic? Yes No Female Head of Household? Yes No

Parent/Guardian Information

Parent/Guardian Information

Name: _____ Email: _____
 Relationship: _____ Home Phone: (____) _____
 Address (if different): _____ Cell Phone: (____) _____
 City: _____ State: _____ Zip: _____ Work Phone: (____) _____

Emergency Information

In an emergency, when parent or guardian cannot be reached, please contact:

Name: _____ Relationship: _____ Phone Number: _____

Allergies

____ Nuts
 ____ Insect Stings
 ____ Poison Ivy
 ____ Penicillin

Special Instructions (if any)

____ Other Drugs
 ____ Latex
 ____ Other

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 I hereby hold harmless, release, and forever discharge the City of Rochester from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENT/GUARDIAN AS EVIDENCED BY THEIR SIGNATURES BELOW. I ACCEPT:

X _____
 Parent or Guardian Signature Date

X _____
 Youth Signature Date