

# Mayor's Youth Employment and Education Program

2017 – 2018

## PROJECT COORDINATOR (PC) APPLICATION



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### MYEEP Mission

As a collaborative of non-profit organizations, the mission of the Mayor's Youth Employment & Education Program (MYEEP) is to provide job readiness training, work experience, academic support, and personal development to San Francisco youth challenged in their attempt to access employment.

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### What is a PC?

A Project Coordinator (PC) is the *leader of the leaders* that runs the Counselors-in-Training (CIT) youth leadership program. As a PC, you will work with the Youth Leadership Coordinator (YLC) to serve as a role model for and develop the leadership skills of 33 youth from all over San Francisco. You will learn the ins and outs of how to run a youth employment program and how to design various workshops/retreats that focus on improving the life, job, and academic skills of urban youth leaders. This is a unique opportunity to become a leader in your community, build long lasting relationships with youth from all over the city, and help shape the MYEEP experience for program participants.

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### Job Description

#### Duties and Responsibilities

- **Commitment to be a PC for 1 year from June 2017 to June 2018 at our main office at 2012 Pine Street**
- Commitment to the mission of MYEEP, PC, & CIT Program, including becoming a role model in the program and finishing all projects to the best of your ability
- Collaborate with the YLC and fellow PCs to develop, facilitate, and evaluate youth leadership trainings
- Design and facilitate MYEEP Youth Leadership Retreat from Aug 6<sup>th</sup> to Aug 10<sup>th</sup> at UC Santa Cruz
- Event planning & program management of CIT Holiday Party and CIT Graduation
- Commitment to step outside of your comfort zone and engage in new conversations with youth from diverse backgrounds
- Ability to work BOTH in a team and independently
- Develop an understanding and knowledge base of social justice issues that support youth leadership

#### Eligibility

- ✓ Resident of San Francisco
- ✓ Enrolled in school or GED Program
- ✓ Must have a minimum GPA of 2.5
- ✓ Have taken on a leadership role before in school, sports, club, and/or family
- ✓ **Must be a Junior, Senior, or First Year College Student in SF for the 2017 – 2018 school year**
- ✓ Must be legally eligible to work in the U.S. and obtain a work permit
- ✓ **Attend all CIT Workshops (see Timeline) and Retreat from 8/6 – 8/10**

#### Compensation

- PCs will earn an hourly wage of **\$15.50**



# PC MYEEP Program Overview

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## HOW MUCH OF A COMMITMENT IS BEING A PC?

If you are involved in regular after school programs, clubs, or sports, it may not be possible to commit to the PC program. MYEEP requires that you meet your leadership responsibilities on a regular and consistent basis. Please review the timeline below that illustrates PC responsibilities throughout the year. You may only miss 3 workshops before being terminated from the program.

### Timeline

Summer (June – Mid August)

- PCs will work 20 hours per week
- PCs will attend and/or facilitate two workshops a week with the Youth Leadership Coordinator to focus on developing the leadership skills of the CITs
- PCs will attend and facilitate the summer leadership retreat at UC Santa Cruz from Aug 6<sup>th</sup> – Aug 10<sup>th</sup>



Fall (Mid August – December)

- PCs will work 10 hours per week
- PCs will facilitate at least one professional development CIT workshop a month with the YLC
- PCs will plan fall events, such as the CIT Holiday party, and plan winter/spring CIT programming

Winter/Spring (January – May)

- PCs will work 10 hours per week
- PCs will facilitate at least one professional development CIT workshops a week with YLC
- PCs will focus on their own leadership growth by working on their action plans for life after MYEEP
- PCs will plan CIT Graduation and attend the following MYEEP events: ***MYEEP in SF (February), University Day (April), Cherry Blossom Festival Fundraiser (April), MYEEP Graduation (MAY)***

## ACADEMIC REQUIREMENTS AND SUPPORT

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**PCs are required to maintain a 2.5 GPA while they are in the program.** This is to ensure that PCs are prioritizing their education and setting a good example for the CITs. **If a PC starts the program with a GPA that is lower than 2.5, he/she will have to demonstrate that they are working towards raising it.** PCs must submit their report cards or Academic Check-Up sheets as requested. The YLC may place the PC on an Academic Contract, which means that they may be required to attend tutoring in order to stay in the program. The YLC will assist the participant in finding suitable, free tutoring services through MYEEP's partnerships with SFUSD schools and other tutoring providers.

# Application Submission

## Documents, Rules and Interview Process



**TO APPLY → Please fill out this application and submit the following items**

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### FORMS

*Please fill out the following forms in BLUE & BLACK ink and double check that all signature lines are signed*

- Personal Identification Form (Demographics, Family income info, Ethnicity, & Home Language)
- Individual & Mini Workshop Interviews Form
- Parental Consent Form
- Emergency Contact & Medical Authorization Form

### COMPLETE & ATTACH

- A copy of your most recent school transcript
- A copy of your Photo ID (can be a school ID, California ID, Passport, or Permanent Resident Card)
- A Resume with 3 References (Please include reference e-mail, phone number, and position title)
- A Cover Letter that **introduces yourself, explains why you would like to be a PC and why you are qualified**
- Typed response to essay questions

### Submission Rules

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- **ALL APPLICANTS:**  
Turn in paper application (in person) to Luisa Sicairos, the Youth Leadership Coordinator, at MYEEP Central Office at 2012 Pine Street, San Francisco, CA 94115 **by 5:00pm on Friday, March 24<sup>th</sup>**
- **Turning it in before the due date DOES NOT guarantee a position in the program.**
- Complete the entire application in BLUE or BLACK ink. Please don't use pencil or other ink colors.
- If you need help with your application, you may contact Luisa Sicairos, the Youth Leadership Coordinator at (415) 202 - 7945 as soon as possible.
- Once all applications have been received, we will review and call qualified applicants in for an interview.



# Interview Process

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- PC Interviews include a question and answer session with the Youth Leadership Coordinator and other MYEEP staff. Then the PC will be asked to create and facilitate a Mini workshop for the second half of the interview (See Mini Workshop Criteria on next page)
- The YLC will notify hired PC applicants by Friday, April 14<sup>th</sup> and will notify applicants that did not get the position by Monday, April 17<sup>th</sup>



## Mini Workshop Criteria

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You will be required to plan out a mini workshop for your interview. The Youth Leadership Coordinator, current CIT Project Coordinators, and Central Office Staff members will be participants and evaluators of your workshop (about 4 – 6 people). Below are the following requirements for the workshop:

- **Topic:** What is one subject or skill that you think is most important for a youth leader to know? \*  
*\*Once you have answered the question above, design a mini workshop that focuses on that skill or subject*
- **Time:** 30 minutes
- **Materials to include:** Agenda, workshop objective(s), activity materials, and typed workshop curriculum



**The Mini Workshop will be evaluated on the following:**

- ✓ Preparation
- ✓ Clear Instructions
- ✓ Creativity
- ✓ Engagement/Energy
- ✓ Content

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*Thank you for applying to the Project Coordinator Position!*

Stay Connected with MYEEP

[WWW.MYEEP.ORG](http://WWW.MYEEP.ORG)

[FACEBOOK.COM/MYEEP](https://FACEBOOK.COM/MYEEP)

[TWITTER.COM/SFMYEEP](https://TWITTER.COM/SFMYEEP)

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## Short Answer/Essay Questions:



Please attach a separate typed document with your responses (minimum of 5 sentences) that answers these three questions.

- 1) As a Project Coordinator (PC), you are the “leader of the leaders”. You will be working with the Youth Leadership Coordinator to train and support MYEEP youth leaders. Can you define what leadership means to you and what type of leader you hope to be in the program?
- 2) As a PC, you will have an amazing opportunity to inspire and support your peers to grow. Please describe a time in which you went out of your way to help someone else (a family member, friend, co-worker, or stranger). Describe what you did and why you helped them?
- 3) As a PC, you will have the opportunity to design your own trainings and workshops. What is an issue or topic in your community, school, and/or family that you are passionate about and how would you share this passion with other MYEEP youth leaders?

## Individual & Mini Workshop Interviews

Interviews will be held any time between **3:00pm to 7:00pm** on the following dates below. They will be located at the Japanese Community Youth Council (JCYC) at 2012 Pine Street. **Please check off all of the dates you are available for an interview:**

<input style="width: 40px; height: 40px; border: 1px solid black;" type="checkbox"/> <p><b>Monday, March 27<sup>th</sup></b> JCYC 2<sup>nd</sup> Floor Conference Rm</p>	<input style="width: 40px; height: 40px; border: 1px solid black;" type="checkbox"/> <p><b>Tuesday, March 28<sup>th</sup></b> JCYC 2<sup>nd</sup> Floor Conference Rm</p>	<input style="width: 40px; height: 40px; border: 1px solid black;" type="checkbox"/> <p><b>Wednesday, March 29<sup>th</sup></b> JCYC GYM</p>	<input style="width: 40px; height: 40px; border: 1px solid black;" type="checkbox"/> <p><b>Thursday, March 30<sup>th</sup></b> JCYC 2<sup>nd</sup> Floor Conference Rm</p>
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## School Year Schedule

What is the estimated time you get out of school each day for the 2017 - 2018 school year?

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY

Please write in any weekly commitments you will have this school year (including sports, music, lessons, counseling, classes, babysitting, religious commitments) and the time you are committed to attend. For example, write “Dance Team 4pm – 6pm” or “Babysit my baby brother 3pm – 4pm”

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

# Personal Identification

Please print neatly and use BLUE or BLACK ink

Legal First Name		Legal Middle Name		Legal Last Name	
Adopted English Name (optional)			Date of Birth (Month-Day-Year)		Age
Home Address <p style="text-align: right;">SF, CA 94 _____</p>					
Home Phone # (415) _____ - _____			Cell Phone # _____ - _____ - _____		
Email Address			Permanent Resident # (if applicable) _____ - _____ - _____		

## Demographics

Have you been a MYEEP intern before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever applied to MYEEP before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever had a job before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Was it in the last 3 months? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much were you paid?
Name of School	Current GPA	Current Grade Level	High School Graduation Date Month ___/Year _____
Activities (Sports, Clubs, Church, Programs)			
Gender	<input type="checkbox"/> Female	<input type="checkbox"/> Male	<input type="checkbox"/> Transgender
English Proficiency	<input type="checkbox"/> Fluent	<input type="checkbox"/> Somewhat Fluent	<input type="checkbox"/> Not Fluent
Other (check all that apply)	<input type="checkbox"/> Disabled <input type="checkbox"/> LGBTQ	<input type="checkbox"/> I financially support my family	<input type="checkbox"/> I am a parent
Do You Have an Individualized Education Program (IEP)? <input type="checkbox"/> Yes <input type="checkbox"/> No		Reason for IEP	
Juvenile Justice <input type="checkbox"/> I have a Probation Officer Name _____ Phone _____			
Case Management <input type="checkbox"/> I have a Case Manager Name _____ Phone _____			
Living Situation (Please Check All That Apply)			
<input type="checkbox"/> Family	<input type="checkbox"/> Single Parent Household	<input type="checkbox"/> Foster Home	
<input type="checkbox"/> Group Home	<input type="checkbox"/> Homeless	<input type="checkbox"/> Self-Support	

# Family Income Information

PLEASE HAVE YOUR PARENT OR GUARDIAN ASSIST YOU WITH THIS SECTION

Does anyone in the household receive the following (Please Check All That Apply):

- TANF     Food Stamps     GA     Medi-Cal     SSI     CalWorks     Public Housing

How many family members live in your household? \_\_\_\_\_

What is the combined total annual income of everyone in your household? \$ \_\_\_\_\_

## Ethnicity

Information provided in this section will not affect your application status.

Please indicate the ethnicity you identify with.

- African American     Other Black (please specify) \_\_\_\_\_
- Asian -- Chinese     Asian -- Filipino     Asian -- Indian
- Asian -- Japanese     Asian -- Korean     Asian -- Laotian
- Asian -- Thai     Asian -- Vietnamese
- Asian -- Other (please specify) \_\_\_\_\_
- Hispanic/ Latino -- Mexican/Mexican American     Hispanic/ Latino -- Central American
- Hispanic/ Latino -- South American     Hispanic/ Latino -- Caribbean
- Hispanic/ Latino -- Other (please specify) \_\_\_\_\_
- Middle Eastern -- Arab     Middle Eastern -- Iranian
- Middle Eastern -- Other (please specify) \_\_\_\_\_
- Pacific Islander -- Guamanian     Pacific Islander -- Hawaiian
- Pacific Islander -- Tongan     Pacific Islander -- Samoan
- Pacific Islander -- Other (please specify) \_\_\_\_\_
- Native American     Native Alaskan
- European American     European Other (please specify) \_\_\_\_\_
- Multiracial/Multiethnic     Other (Please Specify) \_\_\_\_\_
- Decline to State

## Home Language

Please identify the main language spoken at home.

- English     Spanish     Cantonese     Japanese     Korean
- Laotian     Mandarin     Samoan     Tagalog     Toishanese
- Vietnamese     Arabic     Russian     Khmer/Cambodian
- American Sign Language     Other (please specify) \_\_\_\_\_

# Parental Consent

This page contains three different and distinct permission requests. Please review each section. Authorization to release school student records as well as permission to participate in MYEEP is required.

## Authorization to Release School Student Records

I hereby authorize \_\_\_\_\_ (name of school) to release, upon request by any Mayor's Youth Employment and Education Program (MYEEP) representative academic records or attendance records of \_\_\_\_\_ (name of student) while s/he is a participant of in the program. I also authorize any MYEEP representative to discuss with school staff the academic performance of my child.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

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## MYEEP Media Release

By signing below, you are authorizing MYEEP and it's affiliates to use any pictures or video that may include your child as well as any caption or names associated with the activity. MYEEP regrets that it cannot offer financial compensation for use of these photos.

*I hereby give my consent to all photographs, audio-recordings, program work, and/or video recordings taken of my minor child by staff or an authorized designee of the Mayor's Youth Employment and Education Program (MYEEP), a program of the Japanese Community Youth Council (JCYC). I understand that any such photographs, audio recordings, academic work, and/or video recordings become the property of MYEEP and may be used by MYEEP, JCYC, or any other organizations authorized by MYEEP solely for educational, instructional, or promotional purposes determined by MYEEP in broadcast and electronic media formats now existing or in the future created. MYEEP/JCYC regrets that it cannot offer financial compensation for use of these photos.*

*I have read this agreement and fully understand the content hereof. I represent that I am the parent/guardian of the minor indicated and have signed this agreement freely and without any inducement or assurance of any nature.*

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

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## Permission to Participate in MYEEP

By signing below, you are acknowledging the following:

- You are aware of and consent to your child's participation in the Mayor's Youth Employment and Education Program (MYEEP)
- You consent to your child's participation in evaluations of the program
- MYEEP may contact you regarding your child's participation

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_



# MYEEP

## Emergency Contact & Medical Authorization Form

★ PLEASE BRING THIS FORM TO ALL OFF SITE FIELD TRIPS ★

### PARTICIPANT INFORMATION

First Name \_\_\_\_\_ M \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ San Francisco, CA 94 \_\_\_\_ Date of Birth \_\_\_\_ - \_\_\_\_ - \_\_\_\_

### PARENT/ GUARDIAN CONTACT INFORMATION

Parent/Guardian \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Work Phone Number \_\_\_\_\_

Work Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

### ALTERNATE EMERGENCY CONTACT

Full Name \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_

### DOCTOR'S CONTACT INFORMATION

Name of Doctor \_\_\_\_\_

Phone Number \_\_\_\_\_

### MEDICAL HISTORY

Please list any known allergies to any medications or food products:

\_\_\_\_\_

Please list any known medical conditions that MYEEP should be aware of:

\_\_\_\_\_

Please list any special medical treatment instructions and names of medications that are taken regularly:

\_\_\_\_\_

Should it be necessary for my child to have medical treatment while participating in any MYEEP program activities, I hereby give MYEEP/JCYC staff permission to use their judgment in obtaining medical services for the child. I also give permission to the physician to exercise his/her judgment in providing appropriate medical service. While all reasonable precautions will be taken to insure the safety of my child in all MYEEP program activities, I understand that MYEEP and its staff cannot be held responsible for the accidents that might occur to my child in any of the activities at workshops, work or during field trips. I hereby hold JCYC, MYEEP or its staff harmless of any liability throughout the duration of the program.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# EMERGENCY INSTRUCTIONS

## For Worksite Supervisors, MYEEP Coordinators, and MYEEP Central Office Staff

If a MYEEP Participant is injured while they are under your supervision, please follow these steps:

### STEP ONE: ASSESS THE SITUATION AND ACT

**If 911 is required, call 911 for help.**

- This form must accompany the intern to the hospital.

**If the injury is minor (for example, a small cut), please treat as needed.**

**If the injury requires professional medical attention,**

- Please take the young person to either:
  - Kaiser Occupational Health Clinic at 601 Van Ness Avenue, Opera Plaza, Mezzanine Level, Suite 2008 (closes at 5pm)
  - Kaiser Emergency Room at 2425 Geary Blvd (between Lyon and St. Joseph Avenue)
- This form must accompany the intern to the hospital.

### STEP TWO: CONTACT MYEEP COORDINATOR/CENTRAL OFFICE

- Contact the Participant's MYEEP Coordinator
- If you are unable to reach the MYEEP Coordinator, please call MYEEP Central Office at any of the numbers below:
  - Beth Sachnoff, Associate Director 415-202-7943
  - Alvin Woo, Director 415-202-7914
  - Luisa Sicairos, Youth Leadership Coordinator 415-202-7945
  - Zafiro Joseph, Communications Coordinator 415-202-7944
- Contact the Parents/Guardians or Alternate Emergency Contact listed on the other side of the form.
- Please stay with the intern until a Parent/Guardian or MYEEP Staff Person arrives to accompany the intern.

### STEP THREE: PLEASE DOCUMENT DETAILS OF THE INJURY

- Please write down details regarding the injury:
  - Date
  - Time injury occurred
  - Details of the injury (left arm, right thumb, etc.)
  - Where was the youth taken
- You may be contacted after the incident to provide the details of the injury to a MYEEP Staff Person

As an employee of the Japanese Community Youth Council (JCYC), Workers Compensation Insurance is provided to you if you are injured while working at your MYEEP job. In California, you have the right to pre-designate in advance of any work-related injury, a personal physician who you have received services from before and who is willing to sign an agreement to provide medical care for work-related injuries.

This form documents that you DO NOT want to pre-designate a provider. If you would like to pre-designate a personal physician (must acquire their signature on a separate form), please contact your Coordinator for the form.

**CHECK THE BOX BELOW** to allow MYEEP to follow its standard procedures:

<input type="checkbox"/>	I, the undersigned employee, waive my right to pre-designate a personal physician and understand that I will be referred to a physician that is part of the California State Fund Medical Provider Network.
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\_\_\_\_\_  
Participant Name (Printed)

\_\_\_\_\_  
Participant Signature                      Date                      Parent/Guardian Signature                      Date

## Consent to and Direction for Treatment of Minor

If you are injured on the job and require professional medical attention you may be taken to either Kaiser Permanente Occupational Health Center or the Kaiser Emergency Room.

The *Consent To And Direction For Treatment of Minor* form (on back) allows the MYEEP participant to be treated by Kaiser Permanente with out a Parent/Guardian being present. Signing the form means you consent to you child receiving treatment in the case that a Parent/Guardian is not present.

INSTRUCTIONS- To complete the form fill out the following:

- Write your child's name in the line title RE:
- Enter date of birth
- If your child is a Kaiser member write in their medical record number. If they are *not* a Kaiser member leave that line blank
- Sign, specify relationship and date

If you have any questions about the form please call MYEEP central office at 415-202-7903