



For Provider Use Only

Agency: _____

Hired: Yes No

Date Hired: _____

For HSD Use Only

Referred to: _____

Date: _____

Sonoma County Youth Ecology Corps

SCYEC INTEREST FORM

This is your interest form to participate in the Sonoma County Youth Ecology Corps (SCYEC).

Answer all the questions to the best of your ability and submit this form by e-mail to **SCYEC@schsd.org** or by FAX to **(707) 565-8515**.

Please Print Clearly & Fill In The Bubbles Completely: Correct = ● Incorrect = ☒ ☑ ⊕

1. Date _____ 2. Birth Date _____ 3. Age _____ 4. Gender _____

5. First Name _____ 6. Last Name _____

7. Address (Street) _____ (City) _____ (Zip Code) _____

8. Cell Phone _____ Mark bubble if we can text you: 9. Home Phone _____

10. Email address(es) _____

Your answers to the following questions will not negatively impact your eligibility for SCYEC.

11. Race/ethnicity: African American/Black Asian Hispanic/Latino Native American White/Caucasian Other _____
(check all that apply)

12. Have you participated in SCYEC before? Yes No

13. Are you independent (18 or older and no longer claimed by your parents on their tax return)? Yes No I don't know

14. Are you or your family currently receiving SonomaWORKS/TANF? Yes No I don't know

15. Have you ever...
Had a job before? Yes No
Been involved in the legal system? Yes No
Been a foster youth? Yes No
Been pregnant or parenting? Yes No
Been homeless? Yes No
Run away from home? Yes No
Had an IEP or 504 plan? Yes No
Dropped out of high school? Yes No