

Do you like to be outdoors? Need a summer job?

Join the MISSISSIPPI RIVER GREEN TEAM!



Mississippi River Green Team members take care of our river and parks, learn job skills, explore environmental careers and earn money!

What kind of work will I do?

- test water quality in rivers & lakes
- plant trees, prairies & raingardens
- clean up the environment
- create wildlife habitat
- remove invasive plants
- monitor dragonflies



When do I work?

- two-year, year round program
- 9 week full-time in the summer
- monthly workdays during the year

Am I eligible? Yes, if you are...

- a resident of North or NE Minneapolis
- 14-16 years old
- able to work the entire summer
- in good standing at school

Applicants will be interviewed.

Positions are limited.

How do I sign up?

Turn this over and follow the directions.

You will be glad you did!



Learn more: www.mwmo.org/greenteam

To Sign Up:

1. **Discuss** this job with your parents or guardian. They **must** approve and sign below!
2. **Complete** all of the information attached. (Application materials can also be found online at www.mwmo.org/greenteam)
3. **Return** no later than **Friday, March 29, 2019** to: Michaela Neu at mneu@mwmo.org or mail to: Mississippi Watershed Management Organization
2522 Marshall St. NE
Minneapolis, MN 55418

The Mississippi Watershed Management Organization and the Minneapolis Park and Recreation Board created the Green Team as an opportunity for youth to have a mentored job experience, learn about environmental careers and acquire new skills. The Green Team is a special environmental unit of the MPRB's Teen Teamworks program.

Applicant name (first, last): _____

How did you hear about this program? Who told you about it?

Why do you want to be on the Mississippi River Green Team?

I am the parent/guardian of this student who has told me about the Mississippi River Green Team program. I support their application and hope they are invited for an interview.

Signature of parent or guardian

Date

APPLICANT INFORMATION

Your Name

First: _____ Middle: _____ Last: _____

Your Address

Street Address: _____ Apt #: _____

City: Minneapolis State: MN Zip: _____

**Eligible applicants must be a resident of the city of Minneapolis*

Contact Information

Home Phone: _____ Cell Phone: _____

Other Phone: _____

Email Address: _____

Work Eligibility

Social Security Number: _____ - _____ - _____

Date of Birth: ____/____/____ (Month/Date/Year) Your age on June 1, 2019: _____

Eligibility to Work (check one):

U.S. Citizen

Non-Citizen, eligible to work in the U.S. (must provide I-94#): _____

Demographic Information

Gender: Male Female

Ethnicity: Hispanic Not of Hispanic Origin

Racial Background (check all that apply)

African-American Asian-American Caucasian

Native American Other _____

School Information

Name of school you are attending, if any: _____

Current grade level: 7 8 9 10 11 12 N/A

Student ID number: _____

Work History

Company Name: _____

Address: _____

Job Title: _____ Salary: _____

Supervisor: _____ Phone: _____

Employed From (month/year): _____ To (month/year): _____

Company Name: _____

Address: _____

Job Title: _____ Salary: _____

Supervisor: _____ Phone: _____

Employed From (month/year): _____ To (month/year): _____

Activities

Hobbies/special interests: _____

Club/group membership: _____

Future education and goals: _____

Do you have a family member employed by Minneapolis Park and Recreation Board? No Yes, name: _____

List the three parks nearest your home.

1. _____
2. _____
3. _____

THE FOLLOWING SECTION IS TO BE FILLED OUT BY REFERRAL AGENT OR AGENCY.

Staff Name: _____

Agency Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

EMPLOYMENT CODE (check ALL that apply)

I.____ II.____ III.____ IV.____ V.____ VI.____ VII.____ VIII.____

IX.____ X.____ XI.____

Relationship to youth: _____

Additional comments: _____

INCOME AND FAMILY INFORMATION

Family Size and Income

List the name of youth applicant AND all household members related to you by blood, marriage or decree of court who now live or were living with the applicant during the past twelve (12) months. Include as income: gross wages, net income from self-employment, rental income, and pensions including Veterans, dividends, interest, grants, SSDI, OASDI, alimony and/or worker's compensation. Do NOT include as income: any form of public assistance including SSI payments, child support, tax refunds, loans, one-time gifts, unemployment compensation, foster child payments, and/or HUD rental assistance.

Name -include ALL household members:	Relationship:	Age:	Annual Income:
Youth Applicant:	Self		\$
Parent/Guardian:			\$
			\$
Siblings:			\$
			\$
			\$
			\$
			\$
			\$
			\$

Assistance

If you and/or our parent or guardian receives any of the following assistance, complete the section below.

Type of Assistance	Case Number	Date Began	Monthly Amount
Foster Care Allowance	#	Month Year	\$
MFIP/TANF	#	Month Year	\$
General Assistance	#	Month Year	\$
Food Stamps	#	Month Year	\$
Refugee Cash Assistance	#	Month Year	\$

Additional Information (Checking the items below WILL NOT eliminate you from consideration for a summer job)

- Do you have an Individual Education Plan (IEP) at school or do you have a physical, mental, learning, emotional or behavioral disability? Yes No
- Are you pregnant or are you a parent? Yes No
- Have you committed a crime and/or been involved with the juvenile justice system? Yes No
- Are you currently taking English Language Learner (ELL) classes? Yes No

PARENT AND YOUTH AGREEMENT

All youth under 18 must have parent/guardian permission to participate in Teen Teamworks. The parent/guardian must read and complete all sections of this page. If you are currently 18, you may complete this section yourself.

Youth (Applicant) Name: _____ Phone: _____

Parent/Guardian Name: _____ Phone: _____

Emergency Contact Name: _____ Phone: _____

Does your child have a special need or health condition that may affect their worksite assignment or participation in Teen Teamworks? Yes No

If yes, please explain: _____

Parent Permission Statement

- ❖ I hereby give my permission for my child to participate in Teen Teamworks activities, events and field trips.
- ❖ I voluntarily release the Minneapolis Park and Recreation Board from any and all liability based on claimed negligence at times when the youth participant is not under the supervision of Teen Teamworks.
- ❖ I agree that my child may be photographed and/or video recorded by the Minneapolis Park and Recreation Board, or by Park Board designated Teen Teamworks partners, and that their name may be used to promote the Teen Teamworks youth program.
- ❖ I agree that my child take part in program and academic evaluations.
- ❖ I agree to provide any documentation necessary to verify information on this form and I authorize the Minneapolis Park and Recreation Board or their providers to verify information provided, if necessary.
- ❖ I further state that I have read this application and that it is accurate and complete to the best of my knowledge.

By signing below, I attest that I have read, understand and agree with the information and statements within this application. Warning: Title 18, Part 1, Chapter 47, Section 1001 of the U.S. Code – Fraud and False Statements, makes it a criminal offense to make false statements or misrepresentations to any departments or agency of the U.S. as to matter within its jurisdictions.

Youth Signature: _____ **Date:** _____
(Required)

Parent Signature: _____ **Date:** _____
(Required for youth under 18)