

New York Youth Jobs Program: 2026 Youth Certification

Use this form to apply for 2026 youth certification in the New York Youth Jobs Program.

The applicant (you), must complete all items: one through eighteen, except item 11. Item 11 is optional.

- If you are 16 or 17 years old your parent or guardian must sign and submit the application for you.
- If you have little or no access to a computer, mail the completed and signed application to the address above or fax it to (518) 457-3617. We do not accept applications submitted for you by a business or tax consultant.
- If you have questions or need help, please call (877) 226-5724 or email info@youthworks.ny.gov.

1. Last name: _____

First name: _____ Middle initial: _____

2. Birth date (mm/dd/yyyy): ___/___/___ 3. Social Security Number: ___ - ___ - _____

4. Home address: _____

5. City: _____ 6. State: _____ 7. Zip: _____

8. I currently live in the town, or city limits, of the following target area, check one:

Albany	Brookhaven	Buffalo	Hempstead	Mount Vernon
New Rochelle	New York City (5 boroughs)	Rochester	Schenectady	Syracuse
Utica	White Plains	Yonkers	Any Other Area:	_____

9. Email: _____

10. Main phone: (____) ____ - _____ 11. Other phone (optional): (____) ____ - _____

12. a. I am currently attending high school Yes No

b. I am currently enrolled in a High School Equivalency (HSE) program Yes No

13. Are any of the following four statements true? Yes No

a. I am currently unemployed.

b. I was unemployed prior to completing this application.

c. I do not have enough paid work.

d. The work I have does not make use of my skills and training.

14. I am 16 or 17 years old. I have my parent's or guardian's permission to submit this application Yes No

If 'Yes,' complete items a through c.

a. Parent/Guardian First name: _____

b. Last name: _____

c. Phone: (____) ____ - _____

15. I have working papers Yes No

16. a. I am 18 to 24 years old Yes No
- b. Are any of the following five statements true? Yes No
- I have a high school diploma.
 - I have a General Education Development diploma (GED).
 - I have High School Equivalency (HSE) diploma.
 - I have satisfactorily completed a Test for Assessing Secondary Completion (TASC) exam.
 - I am enrolled in a Treatment Accountability for Safer Communities (TASC) program.
17. I would like the Department of Labor to contact me by Phone or Email
- Note: Unless you choose phone, we will use your email for more efficient communication.

New York Youth Jobs Program: 2026 Youth Certification Qualifications:

To participate in the New York Youth Jobs Program:

- You must be 16 to 24 years old, and
- You must live in one of the target areas of New York State listed in item nine on page one, and
- You must be unemployed, and
- At least one of the following statements must apply to you:
 - I am over 18 years of age and do not have a high school diploma or a General Educational Development (GED) or High School Equivalency (HSE) diploma.
 - I am a member of a family that is receiving:
 - Assistance from Temporary Assistance for Needy Families (TANF).
 - Supplemental Nutrition Assistance Program (SNAP) benefits (food stamps).
 - Social Security Income (SSI) benefits.
 - I am receiving a free or reduced-cost school lunch.
 - I was referred to this program by a rehabilitation agency approved by the state, or an employment network under the Ticket to Work Program.
 - have served time in jail or prison or I am on probation or parole.
 - I am pregnant or a parent.
 - I am homeless.
 - I am currently or was in foster care or the custody of the Office of Children and Family Services.
 - I am a veteran.
 - I am the daughter or son of a parent who is currently in jail or prison, or was in jail or prison within the past two years.
 - I am the daughter or son of a parent who is collecting unemployment insurance.
 - I live in public housing or receive housing assistance such as a Section 8 voucher.
 - I have another risk factor not identified above.

18. Agreement:

I swear that I currently meet the qualifications listed above in the New York Youth Jobs Program: 2026 Youth Certification Qualifications section.

I understand that I must provide private, personal information on this application to qualify for the program.

I understand that I do not need to explain why I qualify to anyone I ask for a job, or who gives me a job, or anyone who I work with.

I agree to allow the New York State Department of Taxation and Finance to share my wage record with the New York State Department of Labor.

I believe the information submitted in this application is true, correct and complete.

I understand that the New York State Department of Labor will make sure the information submitted in this application is true and may ask me for more information or details.

I am aware that there are consequences for filing false documents or other information with the government.

I agree to the statements above.

a. Signature (If you are under 18, your parent or guardian must sign):

_____ b. Date: ___/___/___

c. Print name: _____

d. Note: Please be sure to add info@youthworks.ny.gov to your list of email contacts to ensure you receive your certificate by email.