

Last School Attended* _____

- Disability***
- Autism
 - Intellectual/Cognitive Impairment
 - Visual Impairment
 - Learning Disabled
 - Emotional Impairment
 - Seizure Disorder
 - Cerebral Palsy
 - Hearing Impairment

Please describe any physical limitations applicant has. _____

Does limitation require specific accommodations? Please describe. _____

Any additional information to share about communication, accommodations, etc.?

Is there anything else we should know, or consider, with regards to your applicant and their participation in the Youth Employment Ambassador Training Program?

Parent Email* _____

Parent Address* _____

Street Address

City

State

Zip

Parent Phone Number* (____) - _____

Does someone have guardianship of you?*

Yes

No

Applicant is independent adult

If you have a guardian or, you are under eighteen please list that that parent or, guardian?

First Name

Last Name

I understand that my participation in the Youth Employment Ambassador Host Training Program includes a stipend of \$750, which will be paid upon completion of the initial five-week training portion of the program. Further, I agree to complete a minimum of two (2) outreach activities within twelve months of the onset of the YEAH training program.

Applicant Signature

Date

Parent/ Guardian Signature (if under 18)

Date



Youth Employment Ambassador Host TECHNOLOGY ASSESSMENT

Name: _____

Date of Birth: _____

Phone: _____

Email: _____

Preferred Method of Contact: Phone Email Other

Are you your own guardian? Yes No Guardian Name (if applicable):

Connectivity

Do you have a way to connect to the internet at home? Yes No

- How do you connect? Wi-Fi MiFi or Personal Hotspot Phone Data

Ethernet Cable (Hardwire Connection) Other _____

- Would you consider your internet connection stable? Yes No
- Is your internet connection secure (password protected and confidential)? Yes No

Hardware

Do you have a device to use with which to connect? Yes No What type of device do you have? Computer/Laptop Chromebook Smart Phone iPad/Fire/Tablet Cell Phone Other _____

- Does your device have a built-in webcam? Yes No
If not, do you have an external webcam to use? Yes No
- Does your device have a built-in microphone? Yes No
If not, do you have an external microphone to use? Yes No
- Are there other hardware items you may need? Yes No
If so, what other items would be necessary? Mouse Headphones
Flash Drive Other _____

Accommodations

Does your disability present any potential barriers to online learning?

Yes No

Please describe any barriers you may face when learning through an online format:

Have you utilized accommodations in the past to help you use technology?

Yes No

Please describe any accommodations you have used and how they assisted you:

Is there any additional information you would like the YEAH application review committee to know?
