



# Membership Application

2204 E Jackson St. Hugo, OK 74743 | 580-326-9490 | www.littledixie.org

## Applicant Information:

Name:

Date:

Residential Address:

City:

State:

Zip Code:

Date of Birth:

Current Age:

U.S. Citizen

Yes

No

E-mail Address:

Home Phone:

Cell Phone:

Facebook Name:

Shirt Size:

Shoe Size:

Gender:

Male

Female

Marital Status:

Single

Married

Do you identify as LGBTQ?

Yes

No

Prefer Not to Answer

Ethnicity: Check all that apply

African-American

Asian

Hispanic

Native American

Caucasian

Other (Please Specify)

How many total people live in your home?

Do you have children?

Yes

No

# of Children

Does the child(ren) live with you?

Yes

No

Do you have reliable childcare?

Yes

No

If so, who?

Have you been homeless in the past year?

Yes

No

Which of the following is closest to your <b>households</b> annual income?	\$0 - \$5,000	Current Living Status:	With my family
	\$5,001 - \$10,000		Alone or with roommates (I pay rent)
	\$10,001 - \$15,000		With Friends (Steady)
	\$15,001 - \$20,000		It changes all the time based on who will take me in.
	\$20,001 - \$25,000		
	\$25,001 - \$30,000		
	\$30,001 - \$35,000		Other (Please specify)
	\$35,001 - \$40,000		
More than \$40,000			

Are you a Veteran of the United States Armed Service or the Spouse of a Veteran?	Yes No	Do you receive public assistance?	Yes No	Are you registered to vote?	Yes No
Do you have food stamps?	Yes No	Do you live in public housing?	Yes No	Are you or have you ever been in foster care?	Yes No
Are you a migrant youth?	Yes No	Are you the child of an incarcerated parent?	Yes No		

### Emergency Contact Information:

Contact Person:	Relationship to Applicant:	
Address:	State:	Zip Code:
Home Phone:	Cell Phone:	E-mail:

### Transportation Information:

Do you have transportation to and from YouthBuild?	Yes No	How will you get here daily?	
Do you have a valid Drivers License?	Yes No	Do you own a car?	Yes No
			Do you have valid car insurance? Yes No

### Education Information:

Did you drop out of school?	Yes No If yes, when?	Highest grade <b>completed</b> in school?	If you enroll in college, will you be a first generation enrollee?	Yes No
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Last School  
Attended:

Why did you drop  
out of school?

## Work History:

Have you ever had a job before?      Yes      No      Where?

Dates you worked this job:      What was your hourly pay?      Why did you leave?

Did you work in the 6 months prior to enrolling in YouthBuild?      Yes      No

**If yes, please answer the following questions.**

Name of Company:      Company  
Phone Number:

Hourly Wage:      Working Status:      Part-Time      Full-Time      Please describe this working experience:

What are you interested in doing as a career?

## Health Information:

Do you have any physical, medical or health problems that can interfere with your work?      Yes      No  
If yes, please describe:

Do you identify as having a disability?      Yes      No      Do you have health insurance?      Yes      No

Do you have Medicaid?      Yes      No      Do you smoke?      Yes      No

**Please note YouthBuild is a SMOKE FREE CAMPUS and smoking is not allowed on any property, work-site or function.**

Do you wear eyeglasses?      Yes      No      Do you have any illegal substance use or abuse issues?      Yes      No

Are you currently in a program for an addiction such as cigarettes, alcohol or drugs?            Yes            No

### Criminal Record Information:

Answering yes to any of the questions below will **NOT** disqualify you from YouthBuild.

Have you ever been arrested?            Yes            No

Do you have any pending warrants/sentencing or court dates?            Yes            No

Have you ever been convicted of a misdemeanor?            Yes            No

Have you ever been convicted of a felony?            Yes            No

Please describe and include all dates and status of cases.

Are you on probation?            Yes            No  
If so, Officer Name

Are you on parole?            Yes            No  
If so, Officer Name

## Estimated Gross Income Computation:

List all household members (including applicant and children). For each individual, list ALL sources of income and amounts for the entire 6 months prior to the application date. You will need to show proof of income.

Full Name	Age	Relationship	Income Source	Gross Monthly Income
		Applicant		

## Additional Information:

How did you hear about youth build?

YouthBuild Alumni

YouthBuild Current Student

YouthBuild Staff Member

Social Media

Judge/Justice System

Friend/Family

School System

Other:

## Required Documentation:

### Necessary documentation to be submitted with the application.

- \_\_\_\_\_ Birth Certificate
- \_\_\_\_\_ Photo ID (Driver or Non-Driver)
- \_\_\_\_\_ Social Security Card
- \_\_\_\_\_ School Records/Drop Slip from Last School Attended
- \_\_\_\_\_ Proof of Income i.e., check stub, tax return, food stamp documentation, etc.
- \_\_\_\_\_ Probation/Parole/Court Documentation - IF APPLICABLE
- \_\_\_\_\_ Insurance Card/Medical Card - IF APPLICABLE

By signing this application, I submit that I have answered all of the questions accurately. I understand that false information on this form may be grounds for denial of entry to the program or dismissal from the program. I understand that information in this application will be reviewed and verified. In the event any information is intentionally falsified, by myself, or anyone providing information on my behalf, I understand I may be terminated from the program after acceptance or disqualified before acceptance.

I grant permission to Little Dixie YouthBuild to verify any and all information contained within this application. Little Dixie YouthBuild will also be authorized to exchange pertinent information during the application process with any school, health provider, social service agency, employer, youth or criminal justice system that I have come in contact with, in order to evaluate or assist me. All information gathered by Little Dixie YouthBuild, on my behalf, will remain confidential.

I also give permission for any photos taken during Little Dixie YouthBuild Program to be utilized for promotional processes.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent/Guardian if under 18 years old)

\_\_\_\_\_  
(Date)

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