



**2010 NORTHWEST INDIANA COMMUNITY ACTION (NWICA)
SUMMER YOUTH EMPLOYMENT PROJECT (SYEP)
FOR THE FOUR COUNTIES OF INDIANA: LAKE, PORTER, NEWTON, AND JASPER**

INVITATION FOR WORKSITES

Northwest Indiana Community Action would like to invite your business to join us to make the 2010 Summer Youth Employment Project a success! This is your opportunity to help stimulate the local economy by serving as a worksite for local youth so they may have a summer job, acquire new skills, and earn and spend money locally.

WHO

- Employers must be in Lake, Porter, Newton, or Jasper County.
- Eligible Businesses include private, public, non-profit inclusive of the faith-based community, or government entity.

WHAT

- A paid work experience program for youths ages 14 -24 years of age.
- NWICA will recruit youth, pay their wages, provide support and help resolve issues.
- NWICA determines eligibility and certifies all participating youth.
- Worksites will interview, train, supervise, and mentor youth.
- Worksites that are able and approved to oversee more than 12 youths will receive an administrative stipend to employ a site supervisor for 20 hours/week.

WHEN

- Eight weeks over the summer of 2010.
- Youth will work 20 hours per week.
- Days and hours will be scheduled based on worksite's/youth needs.

WHERE

- Employment in private, public and non-profits inclusive of the Faith Based community in the four county areas.
- A special request for "Legacy Projects" that will produce lasting benefits, such as a public playground, or a major open-space improvement.

Cont.

WHY

- Recovery and Reinvestment Act Funds will be utilized to stimulate the local economy.
- Youth will learn job skills, good job habits, and financial fitness Skills.
- Businesses will benefit by having assistance with routine work or special projects.

WHAT YOU NEED TO DO NOW:

Complete the attached worksite application and assurance agreement.

Submit the completed forms to the NWICA office by April 30, 2010

Contact Mrs. Charlene Mahone@ 219-794-1829 or cmahone@nwi-ca.org if you have any questions or wish further information.

Thank you for your interest and participation in this program...

Northwest Indiana Community Action

5240 Fountain Drive

Crown Point, IN 46307

Toll free 1-800-826-7871 or 219-794-1829

www.nwi-ca.com



**NORTHWEST INDIANA COMMUNITY ACTION (NWICA)
SUMMER YOUTH EMPLOYMENT PROJECT 2010 (SYEP)**

WORKSITE APPLICATION TIME TABLE

Date of Issuance of Application: Friday April 9, 2010

Available for pickup at NWICA 5240 Fountain Dr. Crown Point, IN 46307;
or online at www.nwi-ca.com.

Informational Meetings: April 19 or 21, 2010

Monday, April 19 10 a.m. – 12 Noon Crown Point

Conference Room at: Northwest Indiana Community Action
5240 Fountain Drive Crown Point, IN 46307

Wednesday, April 21 10 a.m. – 12 Noon Valparaiso

Community Room at: United Way of Porter County
951 Eastport Centre Dr. Valparaiso, IN 46384

Proposals Due: Friday April 30, 2010

Due by 12:00 noon.

Only originals of application and copies of documents will be accepted

Questions and Inquiries:

It will be the policy of NWICA SYEP to accept questions and inquiries in writing from respondents. Respondents should submit written questions in advance of the informational meeting to:

Charlene Mahone, SYEP Coordinator

5240 Fountain Drive Crown Point, IN 46307

Email: cmahone@nwi-ca.org or Fax (219) 794-1860

Answers will be given at the information meeting and/or in the form of a written addendum to the RFP. Oral explanations or instructions given over the telephone prior to the proposal deadline shall not be binding on NWICA SYEP.

Questions and Answers from the informational meeting will be posted on NWICA website as soon as possible. www.nwi-ca.com



NORTHWEST INDIANA COMMUNITY ACTION
2010 SUMMER YOUTH EMPLOYMENT PROJECT
WORKSITE APPLICATION

1. Worksite Name: _____

2. Worksite Address: _____
NUMBER AND STREET
CITY
ZIP CODE

* If there is more than one location for this worksite, additional applications must be completed for each site address.*

3. Worksite Representative: _____ Title _____

4. Worksite type: (Check one) Non-Profit Private/For Profit Governmental
 Federal Tax ID #: _____ (If applicable; Tax ID # must be listed to be considered for participation in SYEP.)

5. Industry /Sector: Arts & Recreation Day Care/Day Camp Community/Social Services
 Hospitality/Tourism Government Agency HealthCare/Medical

(Check one only) Technology Legal Services Retail/Trading Cultural Program
 Educational Services Real Estate/Property Other:

*Note: (Day Camps must submit a copy of their School -Aged Child Care License)
 (Worksites that provide trips MUST submit a Trip Schedule Request Form)*

6. What is the total number of participants requested for this Worksite: _____

7. Have you identified a Site Supervisor Yes No

8. If #7 YES, List names and titles of all supervisors

Name	Title	Authorized to sign time sheets Yes/No
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9. If # 7 NO , Are you willing to interview participant (s) from Northwest Indiana Community Action SYEP?

Yes : Number of positions _____ No

10. What will be the number of supervisors to Participants at this Worksite? _____ : _____

of Supervisors # of participants

NOTE: Supervisor to Participant ratio must be at a minimum of one (1) adult supervisor to twelve (12) participants. (Ratio may vary to less in the case of childcare-related Worksites and be determined by the age of attending youth.)



11. What are the hours that the SYEP Participants will be working at the Worksite (use the earliest and the latest time):

	From	To
Sunday	_____	_____
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____

12. If any work assignments involve out-of-doors activities,(please complete Page 4) state alternate plans for Participant’s work location and activities during inclement weather:

Alternate Location(s): _____

Planned Activity (ies): _____

13. Has this organization/agency been the subject of any federal, state or city investigation, criminal or civil action in the last five years? Yes ___ No ___

If Yes, please provide all details, dates and outcomes on a separate sheet that must be attached to this application.

14. Work assignments and job descriptions Inclusive of Site Supervisors:

Using the following format please complete and attach one for *each type of work assignment* you propose:

Job Title:

Duties (Give Specifics):

Total # of participants assigned to these job duties:

Requirements (i.e. age, experience, etc.):

15. If a participant attends summer school in the morning, would you have afternoon work available for them?

Yes___ No___ If yes, what age? _____

16. We will be serving participants from 14 -24 years of age. Child labor laws require that a youth must be 16 years of age or older to operate power equipment (including lawn mowers). Does your worksite have a minimum age requirement to operate power equipment including lawn mowers? Yes___ No___ if Yes, what age?



17. Does this organization have the capacity to complete background checks and drug screening test for those age appropriate participant(s) who will work with or around children. Yes__ No__

Worksites that provide trips Must submit a Trip Schedule Request Form (see attachment).

I understand by submitting this Worksite Application; I am not guaranteed participation in the SYEP as a Worksite. If selected to be a SYEP WORKSITE; I will be notified by the NWICA (Provider) to complete the necessary documents to become an official SYEP Worksite.

I hereby certify that all information provided in this application is accurate and complete to the best of my knowledge.

Signature of Authorized Person

Title

Date

NWICA reservse the right to decline participation with any business. All businesses must be in compliance with all Federal, State, Local and Department of Labor regulations.

REQUIRED ATTACHMENTS

1. Signed ASSURANCE AGREEMENT
2. JOB DESCRIPTIONS (Youth and Supervisor)
3. Completed POSITION CONDITIONS & SKILLS INVENTORY
4. The names, job titles and phone numbers of the Worksite's KEY MANAGEMENT PERSONNEL.
5. A TRIP SCHEDULE REQUEST FORM, IF APPLICABLE. (NWICA may be able to accept Trip Requests after the start of the program as needed)
6. PROOF OF LIBILITY INSURANCE, WORKMEN COMPENSATION INSURANCE
7. If participants are expected to perform any of the activities listed below, you must complete the attached SPECIAL PLAN FOR ENVIORNMENTAL/NATURE WORK ASSIGNMENTS (see page 7) and submit as part of this application.
 - Gardening
 - Groundskeeping
 - Park Maintenance and/or clean – up
 - Beautification projects
 - Landscaping
 - Neighborhood clean-up
8. Please attach additional pages to include any pertinent information that may not have already been provided.



NORTHWEST INDIANA COMMUNITY ACTION (NWICA)
2010 SUMMER YOUTH EMPLOYMENT PROJECT
WORKSITE ASSURANCE AGREEMENT

Worksite Name: _____

As a prospective worksite for NWICA Summer youth employment project, I agree to abide by the CSBG American Recovery and Reinvestment Act and Northwest Indiana Community Action regulations. More information regarding these requirements will be provided at the worksite orientation.

(Please initial each item)

- ___ *The Indiana Child Labor Act.*
- ___ *The Right-to-Know Act.*
- ___ *The Labor Standards Provisions contained in Workforce Investment Act (WIA).*
- ___ *Work experience arrangements will not unfavorably impact current employees. The work experience of the participants should not replace the work of employees who have experienced layoffs.*
- ___ *Existing contracts for services or collective bargaining agreements will not be impaired by serving as a worksite.*
- ___ *Sufficient work and equipment will be provided to participants.*
- ___ *Worksite must provide supervision and mentoring to youth via worksite supervisor and alternate supervisor. Direct supervisors may not be an immediate family member of the participant.*
- ___ *Participants shall not be allowed to work in the specific location at a time when religious worship, sectarian instruction, or political activities are being conducted.*
- ___ *Commitment to help participants acquire the experience and training that is required to meet the work readiness goals set for participants*
- ___ *Flexibility in working with participants who have issues that may be barriers to employment.*

Type or print name

TITLE

AUTHORIZED WORKSITE SIGNATURE

DATE

Position Conditions & Skills Inventory

Section 1: What **type of work** does the position entail most frequently? *(Check all that apply)*

- | | |
|--|--|
| <input type="checkbox"/> Inside | <input type="checkbox"/> Normal Conditions |
| <input type="checkbox"/> Outside | <input type="checkbox"/> With animals |
| <input type="checkbox"/> Paperwork | <input type="checkbox"/> With people |
| <input type="checkbox"/> Physical labor | <input type="checkbox"/> With things/machines |
| <input type="checkbox"/> Sitting | <input type="checkbox"/> With Youth |
| <input type="checkbox"/> On your feet | <input type="checkbox"/> With Adults |
| <input type="checkbox"/> Warm temperatures | <input type="checkbox"/> Multi-Projects@ a time |
| <input type="checkbox"/> Cold temperatures | <input type="checkbox"/> Single Projects@ a time |

Section 2: What **skills** does the position require the majority of the time? *(Check all that apply)*

- | | | |
|--|--|---|
| <input type="checkbox"/> Making Decisions | <input type="checkbox"/> Mechanical Ability | <input type="checkbox"/> Building Skills |
| <input type="checkbox"/> Conflict Resolution | <input type="checkbox"/> Reading Comprehension | <input type="checkbox"/> Using measuring devices
(rulers, tape measures) |
| <input type="checkbox"/> Listening to Others | <input type="checkbox"/> Math | <input type="checkbox"/> Repairs |
| <input type="checkbox"/> Talking with Others | <input type="checkbox"/> Writing | <input type="checkbox"/> Computer/Technology |
| <input type="checkbox"/> Caring for Others | <input type="checkbox"/> Foreign Language
(What? _____) | <input type="checkbox"/> Creativity |
| <input type="checkbox"/> Work With Others | <input type="checkbox"/> Presentational Speaking | <input type="checkbox"/> Artistic |
| <input type="checkbox"/> Influencing Others | <input type="checkbox"/> Problem-Solving | <input type="checkbox"/> Cooking |
| <input type="checkbox"/> Directing Others | <input type="checkbox"/> Memorization | <input type="checkbox"/> Cleaning |
| <input type="checkbox"/> Self- Initiative | <input type="checkbox"/> Planning/Organizing | |

Section 3: With what frequency do the following the following conditions occur in this position?

	Usually	Occasionally	Never
1. Loud noises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Working under deadlines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Requires attention to detail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Dealing with change in routine during a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Varying schedule (hours and days change)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Exposure to machinery with moving parts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Appearance & grooming very important	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Requires lifting & carrying (up to 50 lbs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Continually fast pace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Lots of activity going on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 4: What **level of supervision** will you provide? *(Check one)*

- Little instruction/directions provided. Must be self-motivated.
- Some instruction/directions provided at start of a project or day, but then expect employee to work on own
- Will work with employee closely to provide ongoing instruction/directions

Section 5: What level of **contact with others** does the position require? *(Check one)*

- Position is isolated. Contact with others is minimal.
- Position is relatively isolated. Contact with others is available at times such as breaks.
- Position requires some interaction with others.
- Position requires high degree interactions with others.





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TRIP SCHEDULE REQUEST FORM

Worksite Name: _____

Address: _____

List the following information for all scheduled trips:

<u>Date</u>	<u>Time</u>		<u>Trip Location</u>	<u># of participants</u>
	<u>From</u>	<u>To</u>	<u>(include address)</u>	

List all supervisors taking trip(s)

<u>Name</u>	<u>Title</u>
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Number of Supervisors remaining at site:

Number of Participant(s) remaining at site:

Completed By:

_____	_____	_____
<u>Print Name and Title</u>	<u>Signature</u>	<u>Date</u>



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SPECIAL PLAN FOR ENVIRONMENTAL/NATURE WORK ASSIGNMENTS

Worksite Name: _____

1. Description and planned outcome of project: _____

2. Exact boundaries of the area to benefit from the project: _____

3. Written provisions concerning safety standards: _____

4. Provide projected plan of supervision for established plan: _____

