

Foodwise Teens Application

JOHN O'CONNELL HIGH SCHOOL

Foodwise Teens is a job training program in which teens build skills to sustain a healthy life and a healthy planet by a hands-on survey course of sustainable food careers. Foodwise Teens is a program of CUESA (Center for Urban Education about Sustainable Agriculture).

Please write legibly in blue or black pen. Sections marked with * are optional.

Contact Information

First Name: _____ Last Name: _____

Legal Name, if Different: _____

Mailing address: _____

City: _____ Zip: _____

Email: _____

Phone: Home _____ Cell _____

Do you receive texts? Yes No

Personal Information (all information provided will be kept confidential by CUESA staff)

Birth Date: ____/____/____ Current Age: ____ Gender Identity: _____ Gender Pronouns: _____

Race/Ethnicity/Cultural Group: _____

Students without social security numbers will not be excluded from participation in Foodwise Teens.

Do you have a Social Security Number or Tax ID number that you can provide if you are selected?

Yes No Not sure

Legal Guardianship & Living Arrangements

Parent/Legal Guardian #1

Name: _____ Relationship to you: _____

Primary phone: _____ Alternate phone: _____

Email address: _____ Do you live with them? _____

Languages spoken _____ Is this your emergency contact? Yes No

Application Deadline: WEDNESDAY | February 19, 2020

Interview Date: WEDNESDAY | February 26, 2020

Parent/Legal Guardian #2

Name: _____ Relationship to you: _____

Primary phone: _____ Alternate phone: _____

Email address: _____ Do you live with them? _____

Languages spoken _____ Is this your emergency contact? Yes No

If you do not live with a parent/guardian listed above, with whom do you live?

Name: _____ Relationship to you: _____

Primary phone: _____ Alternate phone: _____

Languages spoken _____ Is this your emergency contact? Yes No

If your emergency contact is not a parent/guardian listed above, who is your emergency contact?

Name: _____ Relationship to you: _____

Primary phone: _____ Alternate phone: _____

Languages spoken _____ Is this your emergency contact? Yes No

Education

Year in School: Freshman Sophomore Junior Senior

Are you eligible for free/reduced lunch? Yes No Not sure

Please list all youth programs you're currently involved in (for example, after school programs, weekend activities, clubs, or sports): _____

Reference

As part of this application, you will have to ask an adult who is NOT a family member to serve as a reference for you. References should only be people who have given you permission to list them as a reference ahead of time.

Name: _____

Primary phone: _____ Email address: _____

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Relationship to you: _____ How long have they known you? _____

Did this person give you permission to list you as a reference? Yes No

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3. Do you have experience gardening or cooking? What did you enjoy? Were there any challenges for you? Please explain.

4. How would you like to grow as a person through our program? How can Foodwise Teens help you do that? What do you want to get out of this internship?

If you'd like us to know anything else, feel free to attach additional pages. Once your application is complete, please scan and email to tessa@cuesa.org, turn it in to Jill Marinelli in the counseling office or mail or drop it off at:

CUESA
One Ferry Building, Suite 50
San Francisco, CA 94111

For additional questions, contact us at (415) 291-3276 or tessa@cuesa.org.

Application Due By February 19, 2020