

**Just About Jobs Summer Jobs Program
Worksite Agreement**
(One agreement must be filled out for EACH worksite or department)

I. Agency Name: _____ Address: _____ City: _____ ZIP _____ Contact Person/Title: _____ Phone Number: _____ Tax Exempt ID #: _____ Fax: _____	II. Worksite address, if different from Agency address: _____ Department or Worksite: _____ Address: _____ City: _____ ZIP _____ Department Head: _____ Total # of Youth Requested for this Department: _____
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III. Check: [] Non-Profit Organization [] Public or Government Organization

IV. Session Preference:

- [] Summer Session 1 - June 22, 2009 to July 31, 2009 - 20 hours a week for 6 weeks; # of youth _____
 [] Summer Session 2 - July 6, 2009 to August 14, 2009 - 20 hours a week for 6 weeks; # of youth _____
 [] No Preference

Committing to both sessions will result in a 4 week overlap with youth from both sessions in attendance simultaneously July 6 - July 31

V. POSITIONS:

Position 1	# Youth Requested	Days/Week	Hours From - To	Supervisor	Phone Number

DESCRIPTION: The **duties** to be performed by the youth, and the **skills** to be taught for the position listed above:

Duties:

Skills:

Any Special Requirements to fulfill employment expectations (be specific):

Position 2	# Youth Requested	Days/Week	Hours From - To	Supervisor	Phone Number

DESCRIPTION: The **duties** to be performed youth and the **skills** to be taught for the position listed above:

Duties:

Skills:

Special Requirements to fulfill employment expectations (be specific):

Position 3	# Youth Requested	Days/Week	Hours From - To	Supervisor	Phone Number

DESCRIPTION: The **duties** to be performed by the youth and the **skills** to be taught for the position listed above:

Duties:

Skills:

Special Requirements to fulfill employment expectations (be specific):

If you have more positions, please duplicate this agreement form as many times as you need

VI. The Organization and Department(s) named on page 1 agrees to:

- 1.) Assure that minor age participants under the age of 16 will not be scheduled to work without proof of Work Permit.
- 2.) Provide experienced supervision with a ratio of at least one (1) supervisor to every ten (10) youth. **Y.O.U. does not provide worksite supervision.** Y.O.U. staff visit worksites to communicate with the employer and youth to assure success. Your organization assures that participants will be evaluated on their performance at least once during summer.
- 3.) Provide safe and healthy work environments with sufficient equipment and materials to carry out assignments that will occupy the participants during their working time.
- 4.) Abide by all Federal, State, and Local labor laws and civil rights provisions, as well as regulations and policies established by the Ohio Department of Human Services. Your organization further certifies that participants WILL NOT be placed in positions currently affected by hiring freezes, lay-off and or labor disputes.
- 5.) Your organization additionally agrees to provide and or assume:
 - a. **all expenses related to background checks, health screening and any other related fees (neither Y.O.U., funders nor youth will be responsible for any fees).**
 - b. orientation to the job and assurance that there will be sufficient work available to occupy the numbers of hours assigned.
 - c. accurate time/attendance records, assurance that participants will not be paid for absences, unknown hours or recreational activities, and the assurance that none of the paid work assignments will include sectarian instruction, religious worship, political activity or work in any area that promotes such activity.
 - d. facilitate the ease of monitoring visits and ease of access to files and information for Y.O.U. staff and/or their agents, .

Name and Title of Agency's Authorized Representative

Signature

Date

Name and Title of Department Head Receiving Youth

Signature

Date

UNION CONCURRENCE

Applicable Non-Applicable If Applicable:

Program using worksites where collective bargaining or working agreements exist must have written concurrence of the labor organizations and employer. The undersigned representative of the collective bargaining agency concurs in the use of this worksite for the sole purpose of providing work experience to summer youth through the Ohio Department of Human Services, Summer Youth Opportunities Program.

As the Representative of Local #) _____,

Name

Date

I hereby submit my concurrence to Youth Opportunities Unlimited for the Summer Youth Jobs Program.

PLEASE NOTE: Submission of this request does not guarantee selection as a Youth Opportunities Unlimited Worksite.

When completed, fax this agreement to Pamela Floyd Macer at 216/566-5981 and then mail the original to:

Youth Opportunities Unlimited
Attn: Pamela Floyd Macer
1361 Euclid Avenue
Cleveland, OH 44115