



GLOUCESTER COUNTY VOCATIONAL-TECHNICAL SCHOOL DISTRICT

Youth Education & Career Center @ GCIT – RCSJ College Services Building – 6 Blackwood-Barnsboro Road, Sewell, NJ 08080

Gregory T. Wright
Assistant Principal

YOUTH EDUCATION AND CAREER CENTER AT GCIT

Thank you for your interest in the Youth Education and Career Center at GCIT at the RCSJ College Services Building. Carefully read the instructions below for processing your application.

REQUIREMENTS

**Must be a Gloucester County Resident between the ages of 16 and 24
Pre-Vocational, Vocational, and Career-Oriented classes**

Hours:

Monday – Friday

8:00am – 2:30pm

Minimum attendance of 25 hours a week

Steps for enrolling:

1. Fill out the enclosed application and records release form.

Mail to:

Youth Education & Career Center at GCIT
GCIT – Guidance Office
1360 Tanyard Road
Sewell, NJ 08080

or drop it off to our location:

Youth Education & Career Center at GCIT
College Services Building
6 Blackwood-Barnsboro Road
Sewell, NJ 08080

2. Enclose your Certificate of Non-Enrollment from the last school you attended, or the school district in which you live.
3. Enclose copies of all required paperwork for the WIOA (Workforce Innovation and Opportunity ACT). **(Please see next page for list of documents needed to complete the application.)**
4. After the Youth Education and Career Center receives your completed application, you will be scheduled for a CASAS test date. This test takes approximately 2-3 hours.

***Please note: If you are not WIOA eligible or if you do not receive at least a 5.0 minimum CASAS score, you will be referred to other agencies for assistance.**

5. If the CASAS test is successfully completed you will receive a phone call from the Youth Education and Career Center facilitator if you are WIOA eligible. If you are determined to be WIOA eligible you will receive a phone call to schedule a time for orientation and a start date.

Please make sure that all of the required paperwork is submitted in a timely fashion. If any items are missing, you will not be admitted until all items are received. Thank you for your interest in the Youth Education & Career Center at GCIT.

Sincerely,

A handwritten signature in black ink, appearing to read "GT Wright".

Gregory T. Wright
Assistant Principal



Youth Education & Career Center at GCIT WIOA Eligibility Documents Due with Application

Students are WIOA eligible if they meet one or more of the items listed:

- An Out-of-School youth (OSY) is an individual who is:
 - Not attending any school (as defined under State law);
 - Program is for one year duration for HSE and one year duration for follow-up ONLY.
- One or more of the following:
 - A school dropout;
 - A youth who is within the age of compulsory school attendance, but has not attended school for at least the most recent complete school year calendar quarter. School year calendar quarters are based on how a local school defines its school year quarters;
 - A recipient of a secondary school diploma or its recognized equivalent who is a low income individual and is either basic skills deficient or an English language learner;
 - An individual who is subject to the juvenile or adult justice system;
 - A homeless individual (as defined in sec. 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), a homeless child or youth (as defined in sec. 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), a runaway, in foster care or has aged out of the foster care system, a child eligible for assistance under sec. 477 of the Social Security Act (42 U.S.C. 677), or in an out-of-home placement;
 - An individual who is pregnant or parenting;
 - An individual with a disability;
 - A low-income individual who requires additional assistance to enter or complete an educational program or to secure or hold employment. (WIOA Sec. 3(46) and Sec. 129 (a)(1)(B)) (20 CFR 681.210)

Documents needed with application:

1. Birth Certificate (copy accepted)
2. Social Security Card (copy accepted) – Must have copy of actual card
3. Proof of Residency (post office stamped mail with student's name and current address on it)
4. Students who are classified in school (eligible for special education services) must turn in IEP with the application.
5. Most recent school transcript.

If you have any questions regarding WIOA eligibility, please contact the Scott Costello at the Youth Education and Career Center at 856-468-5000, extension 6841.

_____ Other – please explain: _____

Have you ever been involved with: DYFS* Foster Care Probation

Please check any boxes that apply to you:

Probation Start Date _____ End Date _____

Name of Probation Officer _____

Telephone Number _____

Parole Start Date _____ End Date _____

Name of Parole Officer _____

Telephone Number _____

EDUCATIONAL BACKGROUND:

Last School Attended _____

Date Last Attended _____

What grade were you in when you left _____

Where you involved with the Child Study Team/Special Education:

Yes No

If so what was your classification:

ED SLD MD OHI Other _____

If you were involved with Child Study team, you must provide your IEP when you turn in your application.

Did you ever take TASC Prep Classes:

Yes No Where taken: _____

When taken: _____

Did you ever take the TASC test:

Yes No Where taken: _____

When taken: _____

Scores: _____

I acknowledge that the information provided on this application is true and correct to the best of my knowledge. I understand and agree that falsification of information on this application could lead to dismissal from the Youth Education & Career Center at GCIT.

Signature of Participant

Date

Signature of Parent
(if participant is under 18 years of age)

Date

Gloucester County Institute of Technology offers equal opportunity to qualified individuals regardless of race, creed, color, religion, ancestry, sex, age, effectual or sexual orientation, marital status, gender, national origin, socioeconomic status, disability or veteran's status.

CERTIFICATION OF NON-ENROLLMENT IN SCHOOL
FOR 16 TO 21 YEAR OLDS

**THIS FORM MUST BE COMPLETED AND PRESENTED AT THE TIME OF
REGISTRATION IN AN ADULT EDUCATION PROGRAM**

PART A: TO BE COMPLETED BY APPLICANT
(16 & 17 YEAR OLDS – PARENT/GUARDIAN MUST SIGN)

Last Name _____ First _____ MI _____ Social Security Number _____

Number and Street _____ City _____ State _____ Zip Code _____

Telephone #: () _____ Birth Date: _____ / _____ / _____
Month Day Year

If any information is misrepresented on this form, the State of New Jersey reserves the right to invalidate any program and deny further access to any adult program options.

Applicant's signature: _____ Date: _____

Parent/Guardian's signature: _____ Date: _____
(for 16 & 17 year olds only)

PART B: TO BE COMPLETED BY SUPERINTENDENT OR HIGH SCHOOL PRINCIPAL IN THE PUBLIC SCHOOL DISTRICT
OF RESIDENCE

I, the undersigned, do hereby certify that _____ is not on school rolls in this district.

Signature of Principal Or Superintendent _____ Date: _____

Title: _____ Telephone #: () _____

School District: _____

Place Raised School Seal or Notary's Signature here
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THIS FORM SHALL BE RETAINED AS PART OF STUDENT'S RECORD
AT THE YOUTH EDUCATION & CAREER CENTER AT GCIT