

**ONEIDA COUNTY SUMMER YOUTH EMPLOYMENT PROGRAM  
WORKSITE REQUEST FORM**

DATE: \_\_\_\_\_

*Please note: If your agency has more than one job title or location please fill out Section II.*

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

AGENCY: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ # OF YOUTHS REQUESTED \_\_\_\_\_

SPECIFIC JOB DUTIES \_\_\_\_\_  
\_\_\_\_\_

MINIMUM AGE REQUIREMENT \_\_\_\_\_ WORK DAYS AND HOURS: \_\_\_\_\_

ACTUAL WORKSITE LOCATION \_\_\_\_\_

\*IMMEDIATE SUPERVISOR NAME AND TITLE \_\_\_\_\_

PHONE 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

\*\*ALTERNATE SUPERVISOR NAME AND TITLE \_\_\_\_\_

PHONE 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

INCLEMENT WEATHER PLAN \_\_\_\_\_

COMMENTS (include need for special uniforms, tools, and/or equipment and skills):  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION II:**

JOB TITLE 2: \_\_\_\_\_ # OF YOUTHS REQUESTED \_\_\_\_\_

SPECIFIC JOB DUTIES \_\_\_\_\_  
\_\_\_\_\_

MINIMUM AGE REQUIREMENT \_\_\_\_\_ WORK DAYS AND HOURS: \_\_\_\_\_

ACTUAL WORKSITE LOCATION \_\_\_\_\_

\*IMMEDIATE SUPERVISOR NAME AND TITLE \_\_\_\_\_

PHONE 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

\*\*ALTERNATE SUPERVISOR NAME AND TITLE \_\_\_\_\_

PHONE 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

\*This person need not hold a supervisory position within your agency, but must be the person working directly with the youth(s)

\*\*The alternate supervisor works with the youth(s) when the immediate supervisor is not available

INCLEMENT WEATHER PLAN \_\_\_\_\_

COMMENTS (include need for special uniforms, tools, and/or equipment and skills):

\_\_\_\_\_  
\_\_\_\_\_

**JOB TITLE 3:** \_\_\_\_\_ # OF YOUTHS REQUESTED \_\_\_\_\_

SPECIFIC JOB DUTIES \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

MINIMUM AGE REQUIREMENT \_\_\_\_\_ WORK DAYS AND HOURS: \_\_\_\_\_

ACTUAL WORKSITE LOCATION \_\_\_\_\_

\*IMMEDIATE SUPERVISOR NAME AND TITLE \_\_\_\_\_

PHONE 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

\*\*ALTERNATE SUPERVISOR NAME AND TITLE \_\_\_\_\_

PHONE 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

INCLEMENT WEATHER PLAN \_\_\_\_\_

COMMENTS (include need for special uniforms, tools, and/or equipment and skills):

\_\_\_\_\_  
\_\_\_\_\_

**JOB TITLE 4:** \_\_\_\_\_ # OF YOUTHS REQUESTED \_\_\_\_\_

SPECIFIC JOB DUTIES \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

MINIMUM AGE REQUIREMENT \_\_\_\_\_ WORK DAYS AND HOURS: \_\_\_\_\_

ACTUAL WORKSITE LOCATION \_\_\_\_\_

\*IMMEDIATE SUPERVISOR NAME AND TITLE \_\_\_\_\_

PHONE 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

\*\*ALTERNATE SUPERVISOR NAME AND TITLE \_\_\_\_\_

PHONE 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

INCLEMENT WEATHER PLAN \_\_\_\_\_

COMMENTS (include need for special uniforms, tools, and/or equipment and skills):

\_\_\_\_\_  
\_\_\_\_\_

\*This person need not hold a supervisory position within your agency, but must be the person working directly with the youth(s)

\*\*The alternate supervisor works with the youth(s) when the immediate supervisor is not available

**JOB TITLE 5:** \_\_\_\_\_ **# OF YOUTHS REQUESTED** \_\_\_\_\_

**SPECIFIC JOB DUTIES** \_\_\_\_\_  
\_\_\_\_\_

**MINIMUM AGE REQUIREMENT** \_\_\_\_\_ **WORK DAYS AND HOURS:** \_\_\_\_\_

**ACTUAL WORKSITE LOCATION** \_\_\_\_\_

**\*IMMEDIATE SUPERVISOR NAME AND TITLE** \_\_\_\_\_

**PHONE 1** \_\_\_\_\_ **Phone 2** \_\_\_\_\_

**\*\*ALTERNATE SUPERVISOR NAME AND TITLE** \_\_\_\_\_

**PHONE 1** \_\_\_\_\_ **Phone 2** \_\_\_\_\_

**INCLEMENT WEATHER PLAN** \_\_\_\_\_

**COMMENTS (include need for special uniforms, tools, and/or equipment and skills):**  
\_\_\_\_\_  
\_\_\_\_\_

\*This person need not hold a supervisory position within your agency, but must be the person working directly with the youth(s)

\*\*The alternate supervisor works with the youth(s) when the immediate supervisor is not available