



Youth Name: _____ Last 4 SSN: _____

Youth Representative Name: _____
Person submitting documentations on behalf of youth

Thank you for attending your scheduled certification event on _____ at _____ (am/pm).
After review of the documentation presented, your current eligibility status is as follows:

Certified - All documents have been received. Please check your youth portal for next steps.

Not Certified - You are currently missing the following document(s):

___ Proof of Age

___ Proof of a valid **SOCIAL SECURITY NUMBER**

___ Proof of **DC RESIDENCY**

___ Proof of **PERMISSION TO WORK** in the United States

___ Proof of Parent/Guardian **Consent**

Participants under the age of 18 must submit a signed Parental Consent Form

___ Official **Transcript**

___ School **Schedule Verification Form**

___ Two Letters of **Recommendation** (One Academic & One Character)

In order to continue with the application process, you must submit all required documents by no later than Friday, January 24, 2014 from 1:00pm - 11:59 pm. If you do not submit all of your documents by this date, you will not be eligible to participate in the 2013-2014 **OCHSIP** Program.

OYP Representative Name (print): _____ Station #: _____

Youth/Representative Signature: _____