

# YOUTH AMBASSADOR PROGRAM

## REQUIRED DOCUMENTS CHECKLIST

Thank you for your interest in the Pasadena Youth Ambassador Program for students ages 14-18 who attend a high school in the City of Pasadena.

### ***Please submit all of the following documents with this application:***

- School ID – Student must be 14 years of age and enrolled in a high school in the City of Pasadena
- Application – Please check for accuracy and make sure every line is filled out as required
- Rules and Responsibilities – Keep one copy for yourself
- Submit your most recent report card – A minimum of 2.5 GPA is required
- Fall 2022 semester grades
- Signed copy of your social security card
- Work Permit – Please take the form to your academy counselor or pathways office for processing. (Work permit forms provided by school office are also acceptable)
- Copy of a direct deposit slip from your bank, or attached direct deposit form filled out.  
**Account should be under student's name**
- W-4 Form
- Interview date and time provided below – **Please make sure a parent or guardian is present at the time of interview.**

**INTERVIEWS WILL BE DETERMINED BASED ON RECEIPT OF A COMPLETED APPLICATION**

If you have any questions, you may contact La Toya Andrews at **(626)-744-6879**.

## STUDENT INFORMATION

Each student who participates in the Ambassadors Program must complete this registration form and Parental Permission and Release Form.

Date \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ School Name \_\_\_\_\_

Grade in September 9 10 11 12 Social Security No. \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Home Address \_\_\_\_\_ City/ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Parent Cell # \_\_\_\_\_ Student Cell# \_\_\_\_\_

Student E-mail: \_\_\_\_\_

Who referred you to the program? \_\_\_\_\_

**PARENT/GUARDIAN, PLEASE INITIAL THE FOLLOWING**

My Child has permission to be photographed or videotaped while participating in the program and have those photos posted on the program website:

Yes  No

My Child has permission to participate in any surveys conducted for grant purposes:

Yes  No

My Child has permission to walk or ride the bus from daytime events only:

Yes  No

My Child has permission to participate in the Youth Ambassador Program

Yes  No

Parent/Guardian Signature \_\_\_\_\_

**MEDICAL INSURANCE**

Is student covered under a Medical Insurance Program?  Yes  No

Insurance Provider \_\_\_\_\_ ID # \_\_\_\_\_ Group # \_\_\_\_\_

Physicians Name \_\_\_\_\_ Physician Phone # \_\_\_\_\_

Medical Problems / Allergies / Physical Limitations / Instruction: \_\_\_\_\_

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

**EMERGENCY CONTACT (IF PARENT/GUARDIAN CANNOT BE REACHED)**

Contact Name & Relationship \_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_ Cell Number \_\_\_\_\_

\_\_\_\_\_

## PARENTAL RELEASE AND WAIVER

In consideration for the enrollment of my son/daughter, \_\_\_\_\_ (hereafter "Participant") in the City of Pasadena's Youth Ambassador Program (hereafter the "Program" or "Youth Ambassador Program"), I do hereby unconditionally waive and release the City of Pasadena and all affiliated entities thereof, their successor, assigns, and all officers, representatives, agents and employees thereof, as to any and all claims, damages, liability, actions or demands from injury or loss of any nature whatsoever which I or the Participant may have or which may hereafter accrue to me and/or the Participant in connection with said Program or other activity arising out of my or the Participant's use thereof of my or the Participant's participation therein and for acts of negligence committed by the City of Pasadena or any agent or employee of the City of Pasadena as well as any related or successor entity.

In providing this waiver and release, the Participant and I have been fully informed of the details and risks associated with participating in the Ambassador Program for the City of Pasadena. I understand the Ambassador Program is a Program established by the City of Pasadena to provide high school students with practical work experience at events in the City. It is hoped that the work experience opportunities provided by the Program will promote employment and job skill development for the participants. On behalf of myself and on behalf of the Participant I understand that the Participant's participation in this Program may lead to severe injury up to and including, broken bones, dismemberment and even death.

Being fully informed, and understanding the many risks that are inherent in the Participant's participation in the above stated Program, including injuries, damages and losses of every nature, I do hereby expressly assume all such risk. I further certify that the Participant is in good physical condition and I am not aware of any disease or injury that would cause or contribute to the Participant becoming injured during the Participant's participation in the Program. I hereby grant permission, if the Participant should suffer injury or illness while participating in the Program, for the officials of the City of Pasadena and/or the Program to use their/its discretion to provide any emergency medical care that may be deemed necessary and/or to have the Participant transported to a medical facility for medical care and treatment and I take full responsibility for this action.

I have read the above release and understand that I and the Participant agree to participate in the Program at our own risk. This release shall be binding on the Participant, me, my personal representatives, assigns, heirs and next of kin for any and all damage and any claim or demands thereof on account of injury of the person or property or resulting in the death of the Participant and/or the undersigned.

I acknowledge that the role of the City of Pasadena is to coordinate work experience opportunities with profit/non-profit organizations. The City of Pasadena is not an employment agency and cannot place the Participant in a job. I/we also understand that this Program does not qualify the Participant for any credit under the California Education Code and that this Program is not affiliated with any educational institution.

I hereby grant to the City of Pasadena permission to attend to the medical needs of the Participant and permission to any physician selected by the staff to hospitalize and secure proper medical treatment for the Participant. In the event the staff determines, in the staff's sole and absolute discretion, that the Participant needs to be transported by ambulance, the staff has my permission to call one. I also accept full responsibility for any and all medical expensed incurred for the Participant.

Participant's Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Emergency Contact Name/Relationship \_\_\_\_\_

Telephone Number \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

## WHAT IS THE PASADENA YOUTH AMBASSADOR PROGRAM?

*To encourage you to “Think Outside the Box” of your usual concept of what constitutes job experience.*

*To meet people you may not normally meet, such as political figures, artists, business executives, entrepreneurs, etc.*

The program began in 2001 to provide job experience to high school students through participation at special events held by non-profit and for-profit organizations in the City of Pasadena. The program provides an opportunity for youth to gain valuable work experience as docents, attendants, and event planners and as a spokesperson for the program. They assist with the set-up and break-down of events, creation of marketing and promotional materials and help to plan events, etc. The Ambassadors work primarily on weekends but during the summer, there may be jobs available during the week. Students in the Youth Ambassador Program earn compensation of \$16.11 an hour as of July 1, 2022.

### **PASADENA SCHOOLS REPRESENTED:**

Blair High School	Pasadena High School	Polytechnic School
John Muir High School	Marshall Fundamental	Mayfield School

### **HOW ARE EVENTS ASSIGNED TO YOUTH AMBASSADORS?**

It is on a first come first serve basis. The Youth Ambassadors are notified that the events are online on the last Monday of the month for events on the following month; it is their responsibility to register for an event online to express an interest in working. Some events have a limit on the number of Ambassadors required and others are unlimited.

### **METHOD OF RECRUITMENT:**

We attend events that appeal to high school students and the Youth Ambassadors recruit friends who they think would be an asset to the program. Due to the demand for open positions an interested student may be placed on the waitlist until an opening becomes available.

## **TRAINING OPPORTUNITIES**

Youth Ambassadors also receive opportunities for various trainings in the areas of personal development, college preparation, scholarship applications, financial aid, communication and job readiness.

## **WHAT OPPORTUNITIES ARE AVAILABLE TO THE AMBASSADORS AFTER THEY GRADUATE FROM HIGH SCHOOL?**

The Ambassador program provides our graduating seniors with a leadership opportunity until their 24<sup>th</sup> birthday. The opportunity includes a supervisory role which those selected will be referred to as, “Ambassador Lead”. The Lead is responsible under direct supervision of the program manager to oversee activities of the Ambassadors and to assist with monitoring the assigned duties.

## **WHAT IS A STUDENT ADVISOR?**

The Student Advisor position is a position that is a liaison between the students at their school and the program office. The student advisor reminds students about upcoming events and assists them to become acclimated in the program.

## **PROGRAM SPONSORS**

The Youth Ambassador program works with local partners to provide opportunities: Pasadena Heritage, Pasadena Unified School District, American Cancer Society, South Lake Avenue Business District , Rose Bowl, The Playhouse District, Clazzical Notes, Flintridge Center, Senator Carol Liu, Pasadena Marathon, Day One, Garfield Heights Neighborhood Association, Ronald McDonald House, Ability First, Collective Voices Foundation, Cultural Affairs Division, PBMEA, PMA, and other non-profit entities in the City.

## RULES AND RESPONSIBILITIES

1. **Grades** – All Ambassadors are required to maintain a 2.5 Grade Point Average to remain active in the program. Proof of all grades will be required upon request. Failure to provide report cards on time will result in the student working events for volunteer service credit until such time their grades are provided and meet the minimum requirement.
2. **Absences** – Ambassadors must call his/her supervisor one day in advance of their scheduled event to inform his/her supervisor that they are unable to attend the event and why. Ambassadors must work with their student advisor if applicable to find a replacement. Failure to call by the required time will result in the Ambassador meeting with the program manager before he/she can continue working future events.
3. **Tardiness** – Ambassadors must call his/her supervisor prior to the time he/she is expected to work. Ambassadors who are more than 15 minutes late without an acceptable reason will be sent home.
4. **Substance Abuse** – Will not be tolerated at all. The Ambassador will be removed from the program.
5. **Dress Code** – Ambassadors are required to wear uniform to all events unless otherwise stated. Ambassador uniform is black full-length jeans, Ambassador T-shirt, black shoes, and your City badge. Formal attire is black slacks or skirt, a white plain button up shirt, black dress shoes and your City badge. Continuous abuse of the policy will result in removal from the program. When no uniform is required, ripped jeans, short shorts/skirts, cropped tops, tank tops, and sandals are not permitted.
6. **Electronic Devices /Cell phones**- Are not to be used unless for an emergency while you are working at an event. If you have to be reminded of this, the Lead will have to take away your phone during the event.
7. **Performance and Behavior** – Ambassadors are expected to follow all supervisor's instructions and perform the assigned task. Horseplay, extensive socializing with other Ambassadors or friends who attend events will not be tolerated. The use of profanity will not be tolerated and the Ambassador will be sent home. Ambassadors may not bring friends or family members to work.
8. **Compliance** – Respect and compliance with rules, ordinances, statues and law, both on and off the job is expected.
9. **Transportation from Events** – Ambassadors must be picked up by an authorized person from night events. Ambassadors must provide their own transportation to and from events.



10. **Required Number of Events to stay in the program-** to remain active, an Ambassador is required to attend a minimum of three events per month, which includes at least one training per month. In addition, Ambassador's cannot have consecutive pay periods without event hours. If an Ambassador has consecutive pay periods with missing hours, the Ambassador will be required to attend a meeting with their parent, the Manager and Supervisor in order to discuss the Ambassadors status and interest in the program.
11. **Causes for Removal from Program** - Non-compliance with the above rules will be cause to be removed from the program. Warning Notices – email notices will be sent after a violation of any rules; after the second warning notice if there is a third violation you will be removed from the program.
12. If Ambassador is unresponsive to confirmation for events within 24 hours to the Supervisor, they will be removed from that event.
13. **Cancellation**-If an Ambassador cancels an event within 24 hours of the event, the Ambassador must find their own replacement and also contact the Supervisor to explain why they are cancelling and who their replacement is.
14. **Registration** is an important component of the program- incomplete registration information makes it difficult to confirm events.
15. **Exit Review** - If an Ambassador needs to exit from the program, they must complete an exit form.
16. **Outside Employment** – All Ambassadors are required to tell the Manager if they have a second job. They must provide the Manager their work schedule and fill out an outside employment form.

I HEREBY AGREE TO THE ABOVE RULES AND REGULATIONS AND UNDERSTAND THAT IF I VIOLATE ANY OF THESE RULES, I AM SUBJECT TO IMMEDIATE REMOVAL FROM THE PROGRAM. I ALSO AGREE TO AN EXIT INTERVIEW IF I VOLUNTARILY DECIDE TO LEAVE THE PROGRAM.

Youth Ambassador's Signature \_\_\_\_\_

Parent Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

**Manager Initial's** \_\_\_\_\_

## RULES AND RESPONSIBILITIES – STUDENT COPY

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8. **Compliance** – Respect and compliance with rules, ordinances, statues and law, both on and off the job is expected.
9. **Transportation from Events** – Ambassadors must be picked up by an authorized person from night events. Ambassadors must provide their own transportation to and from events.

10. **Required Number of Events to stay in the program-** to remain active, an Ambassador is required to attend a minimum of four events per month, which includes two trainings per month minimum. In addition, Ambassador's cannot have consecutive pay periods without event hours. If an Ambassador has consecutive pay periods without event hours, the Ambassador will have to attend a meeting with their parent, the Manager and Supervisor in order to discuss the Ambassador's status and interest in the program.
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I HEREBY AGREE TO THE ABOVE RULES AND REGULATIONS AND UNDERSTAND THAT IF I VIOLATE ANY OF THESE RULES, I AM SUBJECT TO IMMEDIATE REMOVAL FROM THE PROGRAM. I ALSO AGREE TO AN EXIT INTERVIEW IF I VOLUNTARILY DECIDE TO LEAVE THE PROGRAM.

Please fill out the following forms

1. Work Permit Form (Form provided from school also accepted)
2. Direct Deposit Form (Form provided from bank also accepted)
3. W-4 Form

**STATEMENT OF INTENT TO EMPLOY A MINOR AND REQUEST FOR A WORK PERMIT—CERTIFICATE OF AGE**

CDE Form B1-1 (Rev. 02-14)

A "STATEMENT OF INTENT TO EMPLOY A MINOR AND REQUEST FOR A WORK PERMIT—CERTIFICATE OF AGE" form (CDE Form B1-1) shall be completed in accordance with California *Education Code* 49162 and 49163 as notification of intent to employ a minor. This form is also a Certificate of Age pursuant to California *Education Code* 49114.

*(Print Information)***Minor's Information**

Minor's Name ( <i>First and Last</i> )		Home Phone	Grade
Home Address		City	Zip Code
Birth Date	Social Security Number	Age	Student's Signature

**School Information**

School Name	School Phone	
School Address	City	Zip Code

**To be filled in and signed by parent or legal guardian**

*This minor is being employed at the place of work described with my full knowledge and consent. I hereby certify that to the best of my knowledge and belief, the information herein is correct and true.*

Parent's Name ( <i>Print First and Last</i> )	Parent's Signature	Date
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**To be filled in and signed by employer**

Business Name or Agency of Placement	Business Phone	Supervisor's Name
Business Address	City	Zip Code
Employer's Maximum Expected Work Hours: _____ hours per day _____ hours per week		
Describe nature of work to be performed: _____		

*In compliance with California labor laws, this employee is covered by workers' compensation insurance. This business does not discriminate unlawfully on the basis of race, ethnic background, religion, sex, sexual orientation, color, national origin, ancestry, age, physical handicap, or medical condition. I hereby certify that, to the best of my knowledge, the information herein is correct and true.*

Employer's Name ( <i>Print First and Last</i> )	Employer's Signature	Date
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**For authorized work permit issuer use ONLY**

Maximum number of work hours when school is in session:								Maximum number of work hours when school is not in session:							
Mon	Tues	Wed	Thur	Fri	Sat	Sun	Total	Mon	Tues	Wed	Thur	Fri	Sat	Sun	Total
Proof of Minor's Age ( <i>Evidence Type</i> )								<b>Check Permit Type:</b> <input type="checkbox"/> Full-time <input type="checkbox"/> Restricted <input type="checkbox"/> General <input type="checkbox"/> Work Experience Education, Vocational Education, or Personal Attendant <input type="checkbox"/> Workability							
Verifying Authority's Name and Title ( <i>Print</i> )															
Verifying Authority's Signature															

**For more information** about child labor laws, contact the U.S. Department of Labor at <http://www.dol.gov/>, and the State of California Department of Industrial Relations, Division of Labor Standards Enforcement at <http://www.dir.ca.gov/DLSE/dlse.html>.

Prenote on PD: \_\_\_\_\_

DirDep on PD: \_\_\_\_\_

# CITY OF PASADENA ELECTRONIC PAYROLL DIRECT DEPOSIT SIGN-UP FORM

Sign up for electronic deposit of your payroll check by taking the following 3 steps:

**Step #1:** Complete the following form (PLEASE PRINT)

I, hereby, authorize CITY OF PASADENA to initiate deposits (credits) and/or corrections to the previous credits to the financial institution indicated. The financial institution is authorized to credit and/or correct the amounts to my account. This authority is to remain in full force and effect until either I revoke it by giving 10 days prior written notice to the company designated above, or, in the case of payroll deposits, upon termination of my employment with such employer.

Employee Signature \_\_\_\_\_

Date \_\_\_\_\_

Daytime Phone # \_\_\_\_\_

Employee Name (PLEASE PRINT) \_\_\_\_\_

\_\_\_\_\_  
Social Security No. (last 4 digits only)

Department \_\_\_\_\_

START    CANCEL    CHANGE FROM

CHANGE TO

Financial Institution (Bank, S&L, Credit Union) _____ Checking__ \$ _____ to Savings __ Acct#: _____
Financial Institution (Bank, S&L, Credit Union) _____ Checking__ \$ _____ to Savings __ Acct#: _____
Financial Institution (Bank, S&L, Credit Union) _____ Checking__ \$ _____ to Savings __ Acct#: _____

Financial Institution (Bank, S&L, Credit Union) _____ Checking__ \$ _____ to Savings __ Acct#: _____
Financial Institution (Bank, S&L, Credit Union) _____ Checking__ \$ _____ to Savings __ Acct#: _____
Financial Institution (Bank, S&L, Credit Union) _____ Checking__ \$ _____ to Savings __ Acct#: _____

**Step #2:** Insert a voided check of your account from your financial institution. The check has information needed to deposit funds directly into the account of your choice.

Note: All new acct #s are subject to prenote (to ensure that the acct #s and routing #s are valid)  
PLEASE ALLOW 1- 2 PAYDAYS FOR PROCESSING

CLICK HERE TO INSERT VOID CHECK

**Step #3:** Please submit the completed form **personally** to the Payroll Division (City Hall / 3rd Floor / Finance / Room S309) **for your own security.**