Panther Youth Partners
Intake Form

What we offer:

- Provide financial support for students desiring to earn a GED or obtain an approved vocational certificate.
- Mentoring to help meet student needs
- Instruction on effective job seeking skills
- Career Counseling
- Guidance when applying for college and financial aid
- Provide job shadowing opportunities with local businesses

How to Qualify:

Panther Youth Partners is a federally funded program and has set guidelines for eligibility.
You must be between the ages 16 – 24. Income is the primary eligibility factor.

To calculate your income to determine eligibility:

1. If you are 18 – 24 and claim yourself on income tax and don’t make more than $11,770 you meet the income qualifications.
2. If you are 16 – 24 and are living with your parents and they claim you on their tax return, count the number of related family members living in your household and find on the chart provided. If the total income is less than the corresponding annual income given, you meet income qualifications.
3. If you live with a family and you are recorded on the food stamp verification, you automatically meet income qualifications.
4. Please check if this applies to you or your family:
   _______ Food Stamps _________ Disability Income
5. Is your goal to earn your GED: ________________ or Vocational training:________________________

<table>
<thead>
<tr>
<th># of family in household</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>11,770</td>
</tr>
<tr>
<td>2</td>
<td>15,930</td>
</tr>
<tr>
<td>3</td>
<td>21,821</td>
</tr>
<tr>
<td>4</td>
<td>26,939</td>
</tr>
<tr>
<td>5</td>
<td>31,795</td>
</tr>
<tr>
<td>6</td>
<td>37,186</td>
</tr>
<tr>
<td>7</td>
<td>42,577</td>
</tr>
<tr>
<td>8</td>
<td>47,968</td>
</tr>
</tbody>
</table>

Name: ______________________________________________________

Phone: _____________________________________________________

Best time to contact you: _______________________.

For more information, please contact:
Benjamin Carter, Highlands’s Benjamin.carter@southflorida.edu 863-784-7102
Eddie Cuencas, Highland’s eddie.cuencas@southflorida.edu 863-784-7161
Sandi Urmann, Highland’s Sandra.urmann@southflorida.edu 863-784-7155
Panther Youth Partners
Objective Assessment

Name: ___________________________________________________________

**Need’s Assessment:**

What are your future career goals? (Be specific)

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Describe a challenge(s) that you now have or have had in the past that may prevent you from reaching your goal?

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

List three things that will help you reach your goal?

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

How will our program help you?

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

In what way will the stipend help you?

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Date: __________________________
Following documents are required for enrollment: (Ignore documents that do not pertain to your situation)

- **Proof of Citizenship (participant)**
  - Birth Certificate or resident alien card for applicant

- **Proof of residency for person applying to PYP (participant)**
  - Any mail addressed to applicant (must be physical address not a P.O. Box)
    or
  - School record indicating address or
  - Driver’s License or Florida ID

- **Signed Social Security Card (participant)**
  - SS#’s for any member of household over age 16.

- **Proof of Income: (parent/guardian)**
  - Food Stamp letter
  - TANF letter
  - Most current Paystub(s) for salary earned in past 6 mos.
  - Child Support
  - Alimony
  - Unemployment
  - SSI/SSDI letter
  - Cash Assistance
  - Retirement

- **Applicant Child’s Birth Certificate (participant’s child)**
- **Applicant Marriage License (participant)**
- **Proof of GED or High School Diploma (provide copy)**