



Northern Tier
Youth Program Worksite Application

I. Name of Worksite:
Mailing Address:
Telephone:
Primary Contact Person:

II. Please list below the names of all individuals who will be (or may be) supervising workers:

III. Explain the specific worksite project(s) you are planning on having the youth help with:

Number of participants needed:
Days of the week and hours that youth should plan to work:

IV. Does your worksite have any restrictions concerning youth due to insurance regulations or Pennsylvania Child Labor Laws?

V. If any of your employees are covered by bargaining unit agreements, the names and addresses of such units must be provided:

Name:
Address:
Union Contact:

THANK YOU FOR COMPLETING THE WIA WORKSITE APPLICATION!

- Bradford County Action
Trehab
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Mansfield, PA 16933