

Career Training Institute

Youth Training and Employment Program Information
347 North Last Chance Gulch
Helena, MT
Phone: 443-0800
Fax: 442-2745

The purpose of the Youth Training and Employment Program is to provide academic, life skills, paid work experience and occupational learning opportunities for eligible youth and young adults between 16 and 24.

CTI operates several youth programs with an emphasis on serving youth and young adults who are no longer in secondary school. Each program has specific eligibility requirements. The information provided on this pre-application will help screen for each of those programs.

What does the Youth Employment & Training Program do for you?

Depending on your age and your education and employment goals, CTI's Youth program provides a variety of services and activities designed to prepare you for a career. Those services include:

- Case management
- Focus on completion of secondary education leading to a diploma or HSE credential
- Paid work experience, including summer employment and pre-apprenticeship
- Occupational skills training
- College preparation including applications, testing and completing the FAFSA
- Leadership development
- Mentoring
- Career planning, life skills and work readiness workshops
- Computer literacy classes
- Financial literacy education
- Entrepreneurial skills training
- Referrals to other services in the community including housing, drug and alcohol counseling, mental health services
- Support services
- 12 months followup services after completion

How to make an appointment:

1. Call Nancy Logan, WIOA Youth Case Manager, at **443-0800** to set an appointment.
2. Information to bring to the first meeting:
 - **Completed Pre-Application**
 - **Copy of Social Security Card**
 - **Driver's License, Picture ID or Tribal ID card**
 - **Copy of Your Most Recent Report Card, if in school.**
 - **Copy of Your Birth Certificate**
 - **Information on Income, i.e. paystubs or other means of support**
 - **Documentation of disability, if appropriate**
 - **Other documentation may be requested**

Career Training Institute Youth Program Pre-Application

Please read and fill out the following information, prior to appointment.

Your Contact Information:

Name	Phone #
	Message Phone#
Address	
Zip	
Age	Birthdate

**It's your responsibility to inform CTI of changes in your phone number or address.*

Where did you hear about CTI's Youth Program: _____

Do you live in public housing or Section 8? YES or NO

Income Information: The following information is necessary for determining your economic eligibility. Before eligibility is established you will have to provide documentation of income or assistance. Please note that some types of income are not included and CTI staff can help determine the income that is counted for the youth program.

- Have you individually or are you in a family that has received **TANF, SNAP OR SSI** benefits anytime in the past six months? **Y** or **N**
- Have you received or been determined eligible to receive free or reduced school lunch? **Y** or **N**
- Circle the size of your family (parents/guardians and/or siblings only) and what you think your family or individual gross income is for the year. If you live with grandparents, other relatives or friends you are a family of 1.

PY'21 Income Table for Adults and Youth:

Family Size	Annual Non-Metro Area	6 Month Non-Metro Area
1	\$13,590	\$6,795
2	\$19,971	\$9,985
3	\$27,419	\$13,709
4	\$33,844	\$16,922
5	\$39,943	\$19,971
6	\$46,715	\$23,357

If you have no income please explain how you have been paying for basic needs this last year in the lines provided below.

Tell Us About Yourself (Mark Yes or No to the following statements as they pertain to your situation):

Statement	Y/N	Comment
High School Student		School: Year in School: Fresh, So, Jr or Sr. Year You Will Graduate:
I often think about dropping out of school because:		Poor grades Poor attendance Disciplinary Issues Other:
I have dropped out of school		Last full grade completed:
I am or have been home schooled		
Currently studying to take the high school equivalency test		
Currently enrolled in college		
In foster care or aged out of foster care		
I live in a group home		
Pregnant or parenting		
Have a misdemeanor or felony		Offense:
Have a physical, mental or learning disability		
A parent in prison or pre-release center		
Struggle with drug or alcohol abuse		
Homeless or runaway		
I receive services from the Chafee Foster Care Independence program		
Currently Employed		Employer: Job Title: Wage: Hours/Week:
High School Graduate		Date Received:
Have GED or High School Equivalency		Date Received:
I have taken a TABE test in the past 6 months		Date: Location:
Have driver's license		
Own or have a car available		

Review the following and circle those you are most interested in:

College Apprenticeship Job Corps Military Employment

List three goals related to school, work or career:

1. _____
2. _____
3. _____

Is there anything else you would like us to know about you? _____

Youth Signature

Date