

WE ARE YOUR DOL



New York Youth Jobs Program
Harriman State Office Campus
Building 12, Room 408
Albany, NY 12240

New York Youth Jobs Program: 2022 Business Certification

You must complete all items, one through ten, except item 7f. Item 7f is optional.

- Mail the completed and signed application to the address above or fax it to (518) 457-3617.
- If you have questions or need help, call (877) 226-5724 or email youthjobs@labor.ny.gov

1. Business Name: _____

2. Federal Employer Identification Number (FEIN): _____

3. Industry Sector: _____

4. a. Business Street Address: _____

b. City: _____ c. State: _____ d. Zip: _____

5. a. Please check the following box if the worksite address is the same as the business address: .

b. If it is not the same, enter the worksite address. Street: _____

c. City: _____ d. State: _____ e. Zip: _____

6. Is the worksite within a reasonable commuting distance from these target areas? Check all that apply:

The city or town limits of: Albany Brookhaven Buffalo Hempstead

Mount Vernon New Rochelle New York City (5 boroughs) Rochester

Schenectady Syracuse Utica White Plains Yonkers

Other: _____

7. a. I am applying for the following type of certificate. Check only one of the two following boxes:

A new certificate: My business is new to the New York Youth Jobs Program.

Recertification: My business was already certified in the New York Youth Jobs Program.

Complete items b through e. Item f is optional.

b. Contact name: _____

c. Job title: _____ d. E-mail: _____

e. Phone: _____ f. Fax (optional): _____

8. If you are a third party submitting this application on behalf of the business named in item one, please provide the following contact information for your business. Complete items A through C.

a. Contact name: _____

b. E-mail: _____ c. Phone: _____

9. How would you like the Department of Labor to contact you? Check one: Phone or Email

Note: Unless you choose phone, we will use your email for more efficient communication.

10. Terms of Service Agreement

- A. **I will post** all New York Youth Jobs Program job openings for my company on the New York State Job Bank, to the maximum extent possible.
- B. **I will confirm** the hires of certified youth with the NYS Department of Labor.
- C. **I agree to allow** the New York State Department of Tax and Finance to share my wage records with the New York State Department of Labor.
- D. **I swear** the pay offered for this position is comparable to wages offered for similar jobs, with appropriate adjustments for experience and training.
- E. **I swear** my business has not intentionally reduced its existing workforce (i.e., terminated an existing employee or given an existing employee a partial work reduction) in order to hire a worker certified for the New York Youth Jobs Program.
- F. **I understand** the reason a youth qualifies for this program is private personal information and agree to not ask the youth to explain or describe why they qualify for the program.
- G. **To the best of my knowledge**, this information is true, correct and complete. I am aware that there are significant civil and criminal penalties for filing false documents or other information with the government.
- H. Signature: _____ I. Date: _____
- J. Print name: _____
- K. Title: _____

New York State (NYS) Job Bank Program Information

Free Self-posting Service

This free service allows you to manage your job orders throughout the recruitment process. For new users, registration approval may take up to 3 business days.

To register go to: <http://newyork.us.jobs>

Free Indexing Feature

Indexing is a free feature of the New York State Job Bank. It allows jobs posted on your own corporate website to upload to the Job Bank daily. This feature helps you reach more jobseekers while saving you from having to post positions in multiple places. Simply add, change or close available job postings on your own site and the information updates daily in the NYS Job Bank.

To register go to: <http://us.jobs/indexingrequest.asp>