



A signature program of
Arts for Learning WNY

Application Due: Friday, September 13th by 5:00 PM

Arts for Learning WNY's signature program, ArtWorks, is a multi-disciplinary, arts-based job training program for Teen Apprentices ages 14-18, residing in the City of Buffalo. For the school year, a cohort of apprentices will engage in both arts activities and projects, led by a Teaching Artist, and professional development days to learn workforce readiness skills. The semester will consist of professional development and art workshops, guest speakers, and off-site trips to various Buffalo-based arts and cultural institutions or post-secondary institutions.

The ArtWorks program Fall session will be from **September 30th, 2024 - December 18th, 2024, Monday - Wednesday, from 3:45 PM - 5:45 PM**. The only exception will be November 11th.

This will be a \$16.00/hour paid position, with commitments and expectations that meet those of a regular job. You will be required to attend **ALL** scheduled sessions. Only 10 applicants will be hired for this Fall semester.

The program will be held **IN PERSON** at the Buffalo & Erie County Public Library, 1 Lafayette Square, Buffalo, NY 14203.

For any questions, please contact:
Maia Martínez, Program Associate

E-mail: maia@artsforlearningwny.org

Phone: 716.881.0917

Fax: 716.408.3279

Address: Arts for Learning WNY, Inc.
1 Lafayette Square
Buffalo, NY 14203

The following items must be received by email, fax, or mail before 5:00 PM on Friday, September 13, 2024.

Incomplete applications WILL NOT be considered!

1. This completed and signed application form including media release, medical information, and field trip permission form.
2. Typed or written responses to ONE short answer question on this application.
3. Copy of the last Quarter report card from the 23-24 school year.
4. One **typed letter of recommendation** from a teacher, principal, coach, or guidance counselor. This may be emailed to maia@artsforlearningwny.org

Personal Information:

Legal Name:

Preferred Name:

Address:

City:

State:

Zip Code:

Phone:

Email:

Name of Parent(s) or Legal Guardians(s):

Phone Number of Parent(s) or Legal Guardian(s):

Emails of Parent(s) or Legal Guardians:

Current School:

Age: **Gender:** **Pronouns:**

Grade: 9th 10th 11th 12th

Type of school: Public Private Homeschool Charter

T-Shirt size: XS S M L XL 2XL

How did you hear about ArtWorks?

Respond to ALL the following questions.

1. Will you be able to attend all scheduled sessions (Monday - Wednesday 3:45 PM - 5:45 PM) from

September 30th, 2024 - December 18th, 2024? If not, explain why.

2. What jobs/positions have you held in the past as an employer or a volunteer?

Job Title	Employer Name	Address	Phone Number

3. Have you participated in a workforce development program in the past? If so, please describe.

4. What technology do you have access to from home? Check all that apply

- Wi-Fi
- Personal Laptop
- School Laptop
- Personal Tablet
- Apple Smartphone
- Android Smartphone

Answer any ONE of the following questions. Typed responses are encouraged and should be attached separately from this application.

What job skills are you most interested in developing through the ArtWorks Apprenticeship Program?
(250-400 words)

Create a one-page short story that defines your community. How does the arts or career in the arts play a part in improving your community? (250-400 words)

How can artistic and creative thinking be applied in the workplace? (250-400 words)

MEDIA RELEASE:

ArtWorks is both a youth development and employment opportunity, and we require parent/guardian signatures. If you have any questions or concerns, please feel free to call Maia at 716.881.0917.

*In this program, ArtWorks apprentices will produce creative visual artwork that may be chosen to be included in future publications for **Arts for learning WNY, Arts for Learning/Young Audiences - National Organization, or any of the partners of this program.***

By signing the form below, you are giving permission to reprint your teenager's work and to use any documentary audio, video, or still photos for project evaluation, and public relations. Additionally, photographs of your teen may be taken for use in future publicity to support the program as well as to showcase your teenager and his or her work. Reprinted publication of your child's work may be in the form of Internet, print, television, or radio.

ArtWorks Apprentice Name:

Grade:

Apprentice Phone:

Apprentice email:

Address:

Zip:

Parent/Guardian Name:

Parent/Guardian Phone:

Parent/Guardian Email:

FIELD TRIP PERMISSION:

In this program, ArtWorks apprentices may be using transportation to select field trips. By signing the form below, you are giving permission for your teenager to take transportation on field trips in the City of Buffalo while working in the ArtWorks Apprenticeship 2024-2025 Session.

Legal Name:

Additional Emergency Contact Name:

Relationship:

Phone:

Emergency Contact Email:

Please report any important health information below.

Name:

Allergies:

Medications:

Food Restrictions:

Other:

Action Plan:

Return materials to: Maia Martínez
Arts for Learning WNY | 1 Lafayette Square, Buffalo, NY 14203 | (716) 881-0917
Email: maia@artsforlearningwny.org Fax: (716) 408-3279

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BOTH SIGNATURES BELOW ARE REQUIRED

By signing below, I declare that all information provided on this application is true, accurate, and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application. I authorize investigations of all statements contained in this application as may be necessary to make an employment decision. I agree that Arts for Learning WNY will not be held liable in any respect if a job offer is not extended, withdrawn, or employment is terminated because of false statements, omissions, or responses made on this application. I understand that employment in ArtWorks is “at will,” which means that either I or Arts for Learning WNY can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by law. I hereby acknowledge that I have read and understand this entire application.

Signature of Applicant:

Signature of Parent/Guardian:

THE NEXT STEP

You are encouraged to contact the Arts for Learning office **before** the application deadline to verify that we have received all your materials.

If all the materials have been received, you will be contacted for an interview with the Arts for Learning staff.

Please return your application materials to:

Maia Martinez, Program Associate

E-mail: maia@artsforlearningwny.org

Phone: 716.881.0917

Fax: 716.408.3279

Address: Arts for Learning WNY
1 Lafayette Square
Buffalo, NY 14203