



City of Camden

Summer Youth Internship Program

Application Instructions

We appreciate your interest in the Summer Youth Internship Program. All forms must be submitted to Ms. Taylor Ali or Mr. Anthony Mixon in-person at the North Camden Community Center (1000 N. 6th Street, 2nd Floor.

Email questions to:
Taylor Ali: taali@camdennj.gov
(856)952-6629
Anthony Mixon: amixon@camdennj.gov
(856)807-4593

You must be a City of Camden resident to qualify for the program.
No applications will be accepted via email!

Complete **each** section of the application **fully**. Review the information to ensure it is correct. **Failure to complete the application thoroughly could result in disqualification from the review process.**

Applications will be accepted and considered complete **ONLY** if each of the following items are submitted:

- **Completed** W-4
- **Completed** NJ W-4
- **Completed** I-9
- **Notarized** Affidavit
- Copy of most recent report card
- Proof of Income **for every adult in the household** (2 most recent paystubs, tax returns, award letter)
- Working Papers (completed online every year)
- Copy of (2) two forms of identification:
 1. Social Security Card
 2. Birth Certificate

Application must be legible, complete and signed. Working Papers must be completed online at myworkingpapers.nj.gov using code **00008379** or type **City of Camden Dept. of Human Services, Recreation** before final acceptance into Summer Youth Internship Program. Applicants will be required to participate in an individual and/or group interview.

All applications must be received by May 1, 2026

Please note: The above requirements are necessary for consideration in the Summer Youth Training Program only. Space is limited and submission of an application **DOES NOT** guarantee placement in the program.



City of Camden

2026 Summer Youth Internship Application

PLEASE COMPLETE ALL ITEMS. IF ITEM NOT APPLICABLE ENTER N/A

PERSONAL INFORMATION

Name: _____ Date: _____

Social Security #: _____ Date of Birth: _____
(OFFICIAL CARD MUST BE PRESENTED)

Home Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Primary Phone #: _____ Alternate Phone #: _____

U.S. Citizen: _____ If NOT, Visa # and expiration date: _____

POSITION APPLYING FOR

Title: **Summer Youth Intern**

What type of work are you interested in? (Indicate 1st, 2nd, and 3rd choice.)

Child Care _____ Office _____ Medical _____ Automotive _____
Recreation _____ Laborer _____ Landscaping/Horticulture _____

EDUCATION

Highest Grade Completed: (K-12) _____ Diploma/G.E.D. _____ Yes _____ No

Name of School: _____

Dates Attended: _____

Clubs/Interests/Hobbies: _____

APPLICATION ESSAY AND SHORT ANSWER QUESTIONS FOR CANDIDATES INTERESTED IN THE FOLLOWING POSITIONS:

Summer Youth Internship Program

Applicants: Please answer the following questions as completely as possible. You may use additional sheets of paper to answer the questions. Employment applications received without the Application essay and short answer questions will be considered incomplete and therefore ineligible for employment.

What are your interests?

What do you hope to gain from this internship experience?

Give examples of activities that you enjoy doing. Briefly explain - why do you enjoy them?

What is a leader?

Do you have any special skills or strengths you would like to share?

Talk about an accomplishment of yours that you are particularly proud of:

EMERGENCY CONTACT FORM

Contact the following in the event of an emergency.

YOUTH INFORMATION:

NAME: _____

CELLULAR PHONE NUMBERS: _____

HOME: _____

PRIMARY CONTACT: _____

RELATIONSHIP: _____

ADDRESS: _____

PHONE: WORK _____ CELL _____ HOME _____

SECONDARY CONTACT: _____

RELATIONSHIP: _____

ADDRESS: _____

PHONE: WORK _____ CELL _____ HOME _____

ALLERGIES: _____

Do you have any disabilities, medical conditions, or support needs that we should be aware of in order to ensure you can fully participate in this program: _____

AFFIDAVIT OF RESIDENCE OF
EMPLOYEE OF CITY OF CAMDEN
(CITY RESIDENT)

STATE OF NEW JERSEY)

SS:

COUNTY OF CAMDEN)

I, _____, of full age, being duly sworn upon my oath
(PRINT YOUR NAME)

according to law, depose ad say:

I am an employee of the City of Camden, my present position is **Seasonal Youth Worker/Recreation Aid.**

I am a permanent resident of the City of Camden. My permanent home address is
_____, Camden, New Jersey, this meaning the
(PRINT YOUR ADDRESS)

place at which I and my family live, and where I now intend to remain.

I am aware that Ordinance MC-1760 requires, as a condition of my employment, that I maintain my permanent residence and home in the City of Camden as long as I remain a City employee, unless specifically exempted under Section 1(c) thereof.

(Minor's Signature)

Sworn and Subscribed to
Before me this ____ day
of _____ 2026

