Department of Youth & Community Development

**DYEDCONNECT** WORKSITE APPLICATIONS:

Worksite Applicants Portal Overview

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# How Do I Access Workforce Online?

The Workforce Online Portal can be accessed via this link (). You will initially arrive on a page providing a brief summary of the DYCD Youth Employment Programs. To complete your Worksite Application, you will need to sign up for a new account via this button "Create Account". This is also where you can sign in if you already have an account.

| Login                       | Log in using one of these options  |
|-----------------------------|------------------------------------|
| Email Address or Username * | Employees Login                    |
| Password *                  | or G Google in. LinkedIn Hicrosoft |
| Login                       |                                    |
| Forgot Password             | Create Account Report an Issue     |

If you're looking to log in, you can either do so using your portal account credentials or using one of the outside options shown.

If you need to create an account, you should do so via the link at the bottom of the page. To create an account, we will need to provide either a valid email address or username and create a password, following the specificed parameters. Next you will need to select a security question from the drop down and then answer it. This will be used if you lose your login information and need to reset your password. Be sure to have it handy. Finally, check the box to indicate that you understand and agree to the NYC.ID Terms of Use, the overall Terms of Use for NYC.gov, and the Privacy Policy for NYC.gov.



Once you have created your account, you will then need to go to the email address associated with it and confirm the address. After you've successfully done so, you wil then be able to log-in via the method shown above.

## **Creating a New Workiste Application**

| What is your relationship to the applicant?* |                        |  |    |
|--|------------------------|--|----|
|  | 0                      |  |    |
| Required                                     |                        |  |    |
| Please enter                                 | applicant's name as it | appears on your Social Security Card         |    |
| Applicant's First Name*                      | Middle Initial         | Applicant's Last Name*                       |    |
| Applicant's First Name                       | Middle Initial         | Applicant's Last Name                        | () |
| Required                                     |                        | Required                                     |    |
| Applicant's Date of Birth*                   |                        | Applicant's Sex at Birth* 😯                  |    |
| Applicant's Date of Birth                    | 0                      |  | 0~ |
| Required                                     |                        | Required                                     |    |
| Applicant's Social Security Number*          |                        | Re-enter Applicant's Social Security Number* |    |
| Applicant's Social Security Number           | ()                     | Re-enter Applicant's Social Security Number  |    |
| Required                                     |                        | Required                                     | )  |

Whether you are signing in for the first time or creating an additional application, you will need to fill in some fields using the information from the applicant's Social Security Card. This information is used to confirm if an application already exists for this individual in the system.





If so, the system will inform you the applicant already exists and you won't be able to go further.

**All Social Security Numbers will be verified for accuracy.** Intentionally submitting an application with an incorrect SS# may result in disqualification from the program.

Finally, you will need to confirm that you meet the requirements for this program and then you can start the application.



# **Completing a Worksite Application**

From here, you should go about completing the various tasks outlined across the seven pages of the application. General applicant information should be entered in the fields on the first and second pages. Some of these will be unable for you to edit, like the applicant's name or SSN. To edit that information, you will need to return to the Dashboard and select "Manange" next to the applicant in question.





Some other fields like the applicant's address, may have you select an option from the drop-down to fill in the rest of that section. In this case, the Portal is using Google to confirm the address you're entering in exists.

| Jacob's Primary Address *                |  |  |  |  |
|--|--|--|--|--|
| Street and Number                        |  |  |  |  |
| 69 Cooper Square                         |  |  |  |  |
| 69 Cooper Square New York, NY, USA       |  |  |  |  |
| 69 Cooper Street New York, NY, USA       |  |  |  |  |
| 69 Cooper Street Brooklyn, NY, USA       |  |  |  |  |
| 69 Cooper Avenue Glendale, NY, USA       |  |  |  |  |
| <b>69 Cooper Street</b> Yonkers, NY, USA |  |  |  |  |
| powered by Google                        |  |  |  |  |

The third page is where you can enter the participant's Emergency Contact information. This first contact will be labeled the "primary", meaning they will be who the Worksite staff will reached out to first, during/after an emergency. You do have the option to add more contacts however, by clicking "+Add Contact" at the bottom of the page.

|   |           |  | _ |  |  |  |
|---|-----------|--|---|--|--|--|
| Emergency Contact Information                             |           |  |   |  |  |  |
| Jacob's Primary Emergency Contact? *                      |           |  |   |  |  |  |
| Emergency Contact's First Name                            | Last Name |  |   |  |  |  |
|   |           |  |   |  |  |  |
| Tony  | Marsten   |  |   |  |  |  |
| Tony Preferred Method of Contact *                        | Marsten   |  |   |  |  |  |
| Tony Preferred Method of Contact *  The Phone Phone       | Marsten   |  |   |  |  |  |
| Tony Preferred Method of Contact *  Home Phone Cell Phone | Marsten   |  |   |  |  |  |



On the fourth page, you should enter in the applicant's Education Information, including their current grade and their OSIS/Student ID#. For the applicant's school, you will need to select one of the options from the available list. To quickly locate the school, you have the ability to search at the top of the drop-down. Once a school is selected, the address will automically populate in the relevant fields.

| 47 The American Sign Language and<br>English Secondary School (02M047)<br>x<br>Q |       |                           |   |
|--|-------|---------------------------|---|
|  | 1     | Borough                   |   |
| energy   |       | Manhattan                 | ~ |
| Energy Tech High School (30Q258)   |       |                           |   |
| - High School for Energy and   | State | School Zip Code           |   |
| Technology (10X565)  |       | <ul><li>✓ 10010</li></ul> |   |

You will also need to enter the applicant's career/job interests, any relevant skills they posesses, and the dates of their summer break. This information will be used during worksite assignment to try and place applicants in prefered roles.

| Start and End Dates of Summer Break              |                     |                           |                          |
|--|---------------------|---------------------------|--------------------------|
| 06/06/2022                                       | to                  | 08/15/2022                |                          |
| Does Jacob have prior work experience,<br>Yes No | , either paid or vo | lunteer? *                |                          |
| Please select THREE career fields in orde        | er of preference th | nat you are interested in | exploring or pursuing: * |
| Career Goal 1 *                                  |                     |                           |                          |
| Construction and Maintenance                     | ~                   |                           |                          |
| Career Goal 2                                    |                     |                           |                          |
| Food Preparation and Culinary                    | ~                   |                           |                          |
| Career Goal 3                                    |                     |                           |                          |
| Education  | ~                   |                           |                          |
| Please select any skills that Jacob is fam       | iliar with:         |                           |                          |
| Adobe Creative Suite                             |                     | Codir                     | ig Languages             |
| Customer Service                                 |                     | Data                      | Entry/Analysis           |
| Graphic Design                                   |                     | Marke                     | eting                    |
| Microsoft Office Suite (Word, Exc<br>PowerPoint) | el, Outlook,        | Prese                     | ntations/Public Speaking |
| Social Media (Facebook, Twitter, Platforms)      | Instagram, Blogg    | ing Web I                 | Design                   |



The fifth page pertains to the applicant's household information, including their household type and the total household income over the past twelve months.

The sixth page of fields is broken up into two sections of infomration. In the first section, you will need to enter whether or not the applicant has health insurance. If they do, you will be asked to select the correct form of insurance. If they don't, you can enter in whether or not the applicant is interested in learning more about getting health insurance.

| Health Information  |   |
|---|---|
| Does Jacob have health insurance? (Select One)*                   |   |
| O Yes   |   |
| No  |   |
| Decline to answer   |   |
| If Yes, what kind of health insurance does Jacob have<br>Medicaid | ? (Check all that apply)*                       |
| Direct-Purchase   | Employment-Based                                |
| State Children's Health Insurance Program                         | State Children's Health Insurance for<br>Adults |
| Military Health Care  | Decline to Answer                               |
| Required  |   |

The second section is for entering the applicant's banking information, primarily if they have a direct deposit account or not. If the applicant does, you can select whether they want to receive paychecks from worksites via their direct deposit or another form of payment.





On the final page, you will need to enter the applicant's responses to the **Ladders for Leaders Essay Questions** in the relevant fields. Each response should be at least 250 words and must have been written by the applicant themselves.



You will also need to upload the applicant's resume and their transcript on this page. The resume should contain all information listed in the below screenshot.

#### **Document Upload**

Instructions: You must attach a resume AND a transcript

Your resume should contain the following sections and information:

- Contact Information (Name, Address, Phone/Cell Number, Email)
- Education
- Employment History/Work Experience
- Volunteer/Leader Experience
- Honors & Awards
- Extracurricular Activities
- Skills

| Name                             | Туре       | Action |
|----------------------------------|------------|--------|
| * Jacob_Sullivan_Resume.docx     | Resume     | 0      |
| * Jacob_Sullivan_Transcript.docx | Transcript | 0      |



Once all seven pages of fields have been filled in or responded to, you will have then be able to select the program you would like to apply to. Click on "Select Program" and you will be taken to a page of all avaliable programs. Use the search bars to find the specific provider in question and once you do, click "Select Program" to apply. To learn more about the Provider, visit the website and contact infomration listed in the Provider Profile.

| Provider has job opportunities in:              | Ladders for Leaders (LFL): Forest Hills<br>Community Center                                | + Select Program |
|---|--|------------------|
| <ul> <li>Brooklyn</li> <li>Manhattan</li> </ul> | Samuel Field YM & YWHA, Inc.<br>http://www.sfy.org   |                  |
| •   | 77-17 QUEENS BOULEVARD ELMHURST 11373  |                  |
|   | <ul> <li>Service Provider: (718) 268-5011</li> <li>Site Contact: (234) 973-8402</li> </ul> |                  |

Before you can submit the application to the chosen provider, you will need to respond "I agree" to a Participant Consent form. You will also need to validate your identity as a real user.



From here, all you need to do is confirm the Provider you're applying to and then your application will be submitted. You will now see a message letting you know it was successful and that you will be notified if you are selected for the program.

| Jacob Sullivar        | n's Dashboard           |                          |                              |   | MANAGE 🌣          |
|-----------------------|-------------------------|--------------------------|------------------------------|---|-------------------|
| Application comp      | lete: Thank you for app | olying. You will be noti | fied if you are selected for | the program.  |                   |
| Application Status    | Application Started On  | Application ID           | Application Submitted On     | Program Selected  |                   |
| Submitted to Provider | May 23, 2022            | DRAFT-0090153013         | June 3, 2022                 | Ladders for Leaders (LFL)<br>Provider: Samuel Field YM<br>& YWHA, Inc.<br>Site: Samuel Field Y Forest<br>Hills Community Center | Print Application |



## **Post-Selection Steps**

You will know you have been selected when you receive a notification via the email provided and see this table below the applicant's dashboard. All sections must be completed or else the applicant cannot be considered for enrollment by the provider.

The first five sections are forms that need to be completed by the applicant. Consents need to be read in full, responded to with either "Yes" or "No", and the applicant will need to enter their initials. Their parent/guardian will also need to sign their names in agreement for each consent.

| Jacob Sullivan's Documents and Forms |           |                   |  |  |
|--------------------------------------|-----------|-------------------|--|--|
| Status                               | Section   | Action            |  |  |
| Not Started                          | Consents  | Click to complete |  |  |
| Not Started                          | W-4       | Click to complete |  |  |
| Not Started                          | IT-2104   | Click to complete |  |  |
| Not Started                          | I-9       | Click to complete |  |  |
| Not Started                          | Survey    | Click to complete |  |  |
| Not Started                          | Documents | Click to complete |  |  |

The next three sections are all Tax Documents where you can fill in the various fields directly. Some of these fields will be automatically filled, using the information in the applicant's profile. Remember, you can edit this information by returning to the Portal Dashboard and selecting "Manage".

| Add Files                             | ×   |
|---------------------------------------|---|
| Proof of Citizenship/Alien Status     |   |
| Туре                                  | File (.jpg, .jpeg, .gif, .doc, .docx, .pdf) |
| (D)                                   | Choose File No file chosen                  |
| Alien Registration Card (not expired) |   |
| Valid U.S. Passport                   |   |
| U.S. Birth Certificate                |   |
| I-94 , I-551, I-797                   |   |
| Certificate of Naturalization         | Close Save                                  |
| Employment Registration Card          |   |

The fifth section contains multiple survey questions about the applicant's current education/work status, as well as some of their career goals.



The final section is for uploading documents to be reviewed by the program to confirm the applicant's eligibility. For some proofs, you can choose whichever document type you want to upload via the drop-down. Be sure that each document is in focus and legible before uploading.

Once a section has been fully completed, the status will change to a green "Completed". You should receive a notification if you have been enrolled, or if there are further edits that need to be done to the submitted material.

| Jacob Sullivan's Documents and Forms |           |           |  |
|--------------------------------------|-----------|-----------|--|
| Status                               | Section   | Action    |  |
| Complete                             | Consents  | Completed |  |
| Complete                             | W-4       | Completed |  |
| Complete                             | IT-2104   | Completed |  |
| Complete                             | I-9       | Completed |  |
| Complete                             | Survey    | Completed |  |
| Complete                             | Documents | Completed |  |



# **DYCD Connect Help Center**

If you have questions or concerns, please **submit a help request** to the **DYCD Connect Help Center**. You may reach the Help Center direct from the banner at the top of DYCD Connect by clicking on the question mark, as shown below.



Alternatively, you may submit a request through the <u>Help Center</u> on the DYCD Connect homepage.

| DYCD RESOURCE CENTER  | DYCD HEL   | P CENTER   |  |
|---|--|--|--|
| DYCD Connect is the main resource center to<br>help organizations communicate and<br>coordinate with the communities they serve.        | The DYCD help center is where you can find resources to help with the technical and operational issues you may come across. Here you can contact DYCD support directly or look into additonal resources and guides that can help you move forward with your tasks. |  |  |
|   | <b>first name</b> Enter your first name  | Last name Enter your last name   |  |
| View DYCD's public website for<br>information about our funded<br>programs.   | <b>t</b> phone Enter your phone number   | email Enter your e-mail address  |  |
|   | <b>organization</b> Select an Organization   |  |  |
| CAPACITY BUILDING<br>DYCD invests in building the capacity<br>of nonprofit organizations as a<br>strategy to help ensure that youth and | <ul> <li>program area</li> <li>Select a Program Area</li> <li>I am a DYCD employee</li> </ul>  | Belect a Program Type  |  |
| families receive high-quality services.   | Select if you need operational or technical help:  |  |  |
| HELP CENTER<br>Having trouble? Send a message to<br>our support team through the Help   | NEED TECHNICAL<br>ASSISTANCE?  | NEED OPERATIONAL<br>ASSISTANCE?  |  |
| Center.   | If you are having a technical issue related to logging<br>in, accessing your services, or experiencing a bug,<br>contact the technical help desk   | Having trouble performing your existing operations<br>using the new systems and tools within DVCD<br>connect? Get in touch with a program specialist |  |
| Read Frequently Asked Questions to<br>learn more about DYCD Connect.  | Detailed Description:  |  |  |
|   | Enter a detailed description   |  |  |

