



Pawnee Nation Education Division
 "Te-Tu-Koo" Resources

P.O. Box 470- Pawnee, Oklahoma 74058- Phone: 918-762-3227- Fax: 918-762-3662

Employment and Training Application

Personal Information

Name: _____ Social Security Number: _____

Address: _____ Telephone #: _____

Date of Birth: _____ Tribe: _____ Cell#: _____

Marital Status: ___ Single ___ Married Education at Enrollment: Student H.S. Dropout H.S. Diploma
 Attending College College Graduate

Please list everyone living in your home

Name	Age	Relation to Applicant	Employer/ source of income	Total yearly income
Self		Applicant		

Barriers	Yes	No	Assistance status	Yes	No	Amount
High School Diploma			TANF			
Lack Skills/Training			SNAP/Foodstamps			
Lack College Degree			SSI (Supplemental Security)			
Transportation			General Assistance			
Homeless			Social Security (Disability)			
Ex-Offender/Felony			Annuity			
Single/head of household			Retirement			
Low income			Foster Care			
Long-term unemployment			School Grants			
Other: _____			Veterans Assistance			
Veteran Preference			Unemployment			



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Transitioning Svc. Member			Commodities			
Selective Service #			Child Support			
Other:			Other:			

Household Employment Information

Applicant: (If under 18 years of age, parents must fill out their information)

If you are currently not employed please list your previous employer (income will not be used from previous employer)

Employer :	Employer Address:	Employer Phone:
Job Title:	Wage:	Hours worked per Week:
Start Date:	End Date:	

Spouse:

Employer :	Employer Address:	Employer Phone:
Job Title:	Wage:	Hours worked per Week:
Start Date:	End Date:	

Other-Any household member 18 years of age or older

Employer :	Employer Address:	Employer Phone:
Job Title:	Wage:	Hours worked per Week:
Start Date:	End Date:	

I certify that I am currently:

Unemployed:

- More than 7 days
- More than 6 months
- Never Worked

Underemployed:

- Working less than 32 hours per week
- Upgrading Requested
- Retraining/Recertification needed

Are there multiple barriers you feel you need assistance with other than the services you are requesting?

Yes No



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A participant who believes their rights or entitlements have been violated will have the opportunity to discuss the grievance with their supervisor or the Director of the specific program. If it cannot be resolved at this level, the following steps should be followed to ensure fair and equal treatment of all concerned:

1. A written complaint should be submitted to the Program Division Director within (10) days of the incident requesting a resolution to the problem/incident.

The complainant will be given a written response from the Program Division Director within (15) working days upon receipt of the written complaint to schedule an informal hearing. The hearing will be held between the complainant and the Program Director.

2. The participant will be notified in writing by the Program Division Director indicating the status of the complaint. If for any reason the Complainant is not satisfied with the resolution, the Complainant can request, within (5) days from receipt of the written notification from the Program Division Director, that a hearing by the tribal Grievance Committee be scheduled.

If for any reason, the complainant is not satisfied with the resolution and all tribal level procedures have been exhausted, the participant has the right to grieve to the U.S. Department of Interiors Civil Rights Office, Washington DC 20240 or by calling the Secretary of the Interior's Division of Workforce Development Programs at 202-219-0740 for further information on the grievance procedure.

Pawnee Nation Employment and Training Applicants referred to employers will be subject to the employers hiring policy pertaining to physical exams which may include drug/substance abuse screening. Pawnee Nation Employment and Training works with employers to establish an understanding that the experience of alcohol or drug program is not, of itself, grounds for adverse action. The Drug Free Workplace Act of 1988 Public Law 100-690 Title V, Subtitle D; and 7CRR part 3017, subpart F maintains that employees have the right to work in a drug and alcohol free environment and to work with a person free from the effects of drug and alcohol abuse. Most companies strive to comply with the Federal Drug Free Workplace Act.

Eligibility determination is based upon a completed and signed application with the required documents. Becoming eligible does not guarantee that an individual will receive training or services. Participant placements are depended upon availability of funds and equitable distribution.

I CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE. I AM AWARE THAT ANY MISREPRESENTATION ON THIS APPLICATION WILL BE GROUNDS FOR IMMEDIATE TERMINATION. I ALLOW THE RELEASE OF INFORMATION FOR VERIFICATION AND REPORTING PURPOSES ONLY.

Applicant Signature

Date



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Parent/Guardian Signature

Date

Pawnee Nation Education and Training Employee Signature

Date

To be entered into the **TERO Database**, please fill out the following information:

Do you have any of the following?

(Check all that apply to you)

___ High School Diploma

___ GED

___ College Degree _____ (Please list degree)

Please list any Certificates, and Work Experience

Please list nature of work you are seeking:

Do you have any of the following?

(Check all the apply to you)

___ Valid Driver's License

___ CDL

___ Other: _____



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Please list your Job Skills (ie: Housekeeping, Construction, Roofing, Clerical, Fast-Food, Custodial, ect)

Skills 1 _____

Skills 2 _____

Skills 3 _____

Any Additional Comments :

The following items are needed to determine eligibility:

(Please keep in mind that your application is considered incomplete until all required documentation is turned in.)

- Certificate of Indian Blood (CDIB Card)
- Social Security Card
- Driver's License or State Issued ID
- Proof of residence (utility bill, rent receipt, lease agreement, or statement from head of household)
- Income verification for last six months (paycheck stubs, food stamp card, commodity approval, health care card, etc.)