

Direct Employment program

Direct Employment Guidelines

Eligibility will be determined by the following criteria:

- 1. Must be an enrolled member of the Bois Forte Band of Chippewa.
- 2. Must reside in St. Louis, Koochiching or Itasca Counties.
- 3. Must apply for services within **30 days of original hire.**
- 4. The amount of financial assistance will be based on the verified need. (Not to exceed \$400.00)
- 5. Letter stating need must accompany this application.
- 6. All eligible applications must be completed prior to services.

No cash payment will be made to participant. Those applicants that are full time employees will receive a maximum amount of \$400.00. Permanent part-time employees will receive a pro-rated amount based upon the maximum amount set for full time employees and number of hours worked as indicated by supervisor completing the Employment Verification Form. On call employees with receive a flat rate of \$100.00. (Employment Verifications are included in application).

The program will help with uniforms, work clothing, work boots/shoes, tools, gas, auto expenses (excluding routine maintenance, cosmetic repairs and/or loan payments), and childcare. Payments will be issued in the form of a purchase order or direct payment to the provider of services. If asking for assistance with childcare please provide a statement including full name of provider, address, and childcare rate. A W-9 form will also be required from the childcare provider.

To apply for Direct Employment:

- 1. Have employer fill out **Verification of Employment** form.
- 2. Write a short **Statement of Need** that includes what you need assistance with.
- 3. Return **application**, **verification**, **and statement of need** to the WIOA office for determination of eligibility.



Bois Forte Reservation Tribal council 13090 Westley Drive Dr. Nett lake, MN 55772 (218) 757-3124 fax (218) 757-3126

Application for Direct employment

Application Date:					
Name:					
Last	First		Middle		
Address:					
Street	City		State	Zip	
Social Security No:/	/	Telephone No. ()		
Date of Birth:	Age:	G	ender:	M	F
Have you ever participated in the I	Direct Empl	oyment Program?			
No					
Yes Yes, if so, when?					
The type of assistance you are appl	lying for: (C	heck all that apply)			
♦ Work clothing					
♦ Work/Winter boots					
♦ Tools					
♦ Gas					
♦ Auto Expenses					
♦ Childcare					



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Verification of Employment

Client Name:		Date of Birth:			
Client Address:					
TO BE COMPLETED B	Y EMPLOYER:	City	State	Zip	
Company Name:					
Address:					
Phone:		City	State	Zip	
	full-time part-time				
Employee works	hours per week.				
Employee's Original S	tart Date:				
Employee will receive a pa	ayroll check for	hours o	on/	_/	
Signature & Title of Co	ompany Official	Date		·	
	lease return by mail to the the above number. AT				
TO BE CO	OMPLETED BY BOIS FORT	E ENROLLM	ENT OFFICER		
I do hereby certify that the above r Minnesota Chippewa Tribe accord		mber of the Bois	Forte Band of Chip	ppewa Indians of the	
Certifying Official Signature		Da	te		



Statement of Need Form

Position you were hired for:						
Are there special clothing or tool requirements for your job? Yes						
Please list what is required for your position. winter boots, thermal underwear, hat, gloves you need or require. You will only be able to purchase Note: A valid driver's license must be provided for any	s, safety glasses, etc. Please be specificate it is specificated the specification on the purchase order.					
1	6					
2	7-					
3	8					
4	9					
5	10					
Which store would you prefer to use: � Herberger's � L & M Supply � Other (Please specify) If you do not require clothing or tools and wi childcare, or other such bill, please write a shinclude a copy of the invoice and address when	ish to use Direct Employment for nort statement below describing y	car repairs,				
Signature						