

TERO WORKFORCE DEVELOPMENT

WORKFORCE APPLICATION



Dear Workforce Applicant:

The Indian Preference law was enacted to ensure that members of the EBCI and other federally recognized tribes are given preference in hiring. Covered employers are required to contact the Tribal Employment Rights Office (TERO) to find qualified Tribal members when hiring and contact at least three (3) Indians offering them the opportunity to apply for the job (unless fewer are listed). The information provided on this application will assist the Workforce Development Coordinator in matching qualified individuals with referrals to employers, contractors, tribal entities and for advertised TERO training. This application asks for demographic and personal assessment of any challenges you might have to being gainfully employed.

As of October 1, 2021, the Job Bank is now part of TERO's new Workforce Development Program ("WFD") component that includes the federally funded work experience programs WIOA & NEWP, formerly referred to as WIA. The EBCI TERO office is now taking applications for the TERO Job Bank and the federally funded work experience (WEX) programs included in this packet. Please fill out the attached application as fully as you can. If you need assistance in filling it out, please do not hesitate to ask. We are happy to assist you.

TERO Workforce participants are responsible for self-promotion and are required to make efforts to establish positive contacts and relationships with prospective employers. Participants are required to comply with all rules and policies of the employer. It is the job bank participant's responsibility to inform TERO of any changes to contact information, especially phone numbers and addresses in a timely manner.

At the end of the application, you will find three documents that are required as follows:

- 1) **TERO Compliance Agreement.** Participants applying for the TERO Job Bank and the federally funded work experience programs are required to affirm the requirements.
- 2) **Pre-Employment Drug/Alcohol Test.** Participants applying for the federal funded work experience programs (WIOA/NEWP) are required to affirm this requirement. The drug screen will be a collection of hair and/or urine samples (for extremely short hair). *Job Bank Exempt*
- 3) **Notice of Mandatory Criminal History Checks.** Participants applying for the federal funded work experience programs (WIOA/NEWP) are required to affirm this requirement. *Job Bank Exempt*

Indian Preference is given in the following order:

- 1) Enrolled members of the Eastern Band of Cherokee Indians.
- 2) Spouse of enrolled members and parents of minor children that are members of the EBCI.
- 3) Members of other federally recognized Tribes.

Welcome to the EBCI TERO Workforce Development Program! You can reach all of us at [828.359.6421](tel:828.359.6421) or TEROWorkforce@ebci-nsn.gov.

We look forward to working with you.

Terri Henry
TERO Director

Kevin Jackson
Workforce Development Manager

Hillary Norville
Workforce Job Bank Coordinator

Doug McCoy
Workforce Job Bank Coordinator

TERO WORKFORCE DEVELOPMENT COMPONENTS

The EBCI TERO Workforce Development component is designed to combat workforce development challenges facing tribal governments, communities, and native organizations to build tribal members' self-sufficiency and increase the economic well-being of tribes through work experience. WFD programs ensure that tribal members are equipped with skill sets and experience necessary to build and sustain careers. The EBCI TERO Workforce Development component has developed a work experience (WEX) approach that supports the development of an individual's career pathway to increase the employability of tribal members through soft skills training and additional technical or other training that is developed for an individual participant. With these skills and experience, participants will contribute to the tribe and its communities with a renewed sense of purpose, cultural enrichment and improved economic well-being of our tribal members, their families, and the greater community.

The Workforce Development component consists of four (4) resources that are described as follows:

➤ **Job Bank.**

In order to maximize Tribal member access to employment and business opportunities. TERO works to ensure Indian people receive their rightful share of jobs and other entrepreneurial economic opportunities. TERO assists members of the Eastern Band of Cherokee Indians with identifying employment skills training programs that help develop job skills in a variety of career areas, including resume building, filling out applications, interviewing for jobs, identification of training for specific jobs and careers. The TERO JOB Bank connects enrolled members with jobs, both with TERO certified vendors and with business performing contracts for the Tribe. Job Bank also identifies employment opportunities among the local businesses to connect Tribal members with seasonal or permanent employment and work opportunities.

➤ **Workforce Innovations Opportunity Act (WIOA).**

WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market and to match employers with the skilled workers they need to compete in the local economy. TERO has developed an array of services that will be offered to WFD/WIOA participants including a work stipend, training in soft skills, occupational skills, job readiness and work experience, to name a few.

➤ **Native Employment Works (NEW).**

The NEW program is designed to provide work-related activities to support job readiness, job placement, and job retention for designated Native American service populations and service areas. TERO's WFD/NEW program will support individuals with resources and provide access to services that will contribute to meeting the basic needs and help participants in establishing a stable environment in which to pursue family and individual self-sufficiency. This WFD/NEW program will continue to help individuals gain job skills and work towards self-sufficiency as well as reduce joblessness. Qualifying participants will receive support and assistance, such as, but not limited to: a work stipend, childcare assistance, travel reimbursements and transportation costs, training fees, work gear and tools.

➤ **Mother Town Healing Program (MTHP).**

The Mother Town Healing Program (MTHP) is intended to assist EBCI enrolled members in recovery by providing a safe and supportive working environment, training for necessary job skills, and discipline to re-enter the workforce in a positive manner. While the goal is for participants to become employable, we also encourage them to rebuild and strengthen community connections that may have been lost due to substance use/abuse disorders. The MTHP has a separate application that is available upon request.

WORKFORCE PARTICIPANT INFORMATION

Please fill this application packet out as fully as you can. If you need assistance in filling it out, please do not hesitate to ask. We are happy to assist you.

YOU MUST BE:

- ✓ An enrolled member of the Eastern Band of Cherokee Indians, a spouse of enrolled member or a parent of minor children that are members of the EBCI or other federally recognized Tribe, or member of other Federally Recognized Tribe.
- ✓ At least 18 years of age and out of high school (graduate or not).
- ✓ Unemployed for seven (7) consecutive days prior to filling out this application
Or under-employed with proof from your current employer.
- ✓ **Reside** on or live near the Qualla Boundary.
- ✓ **Males Only:** Be registered for Selective Service.

YOU MUST SUBMIT WITH THIS APPLICATION:

- ✓ A Tribal Enrollment document, Social Security Card and Valid Driver License (if applicable)

Date: _____

Have you been previously served by this program? NO ☐ YES ☐ What year? _____

Name (as it appears on your Enrollment or Social Security Card)

First Name

Middle Initial

Last Name

Maiden Name

Other Last Name(s), Nicknames or Alias

Physical Address: (House # & Road Name)

Mailing Address: (If different from physical address)

County you live in: _____

Contact Number: _____ Email Address: _____

Tribal Affiliation: _____ Roll No.: _____

(Attach the copy of enrollment verification)

Males Only: Are you registered with the Selective Service? YES ☐ NO ☐

FOR OFFICE USE

Applicant assigned to: Job Bank ☐ WIOA ☐ NEWP ☐ GED ☐

Staff Initials: _____

I. WORK HISTORY

List past employers starting with your current employer or most recent, if applicable.

If currently employed, a statement from your employer is required. The statement must indicate that you are under-employed, as in not having enough paid work or not doing work that makes full use of your skills and abilities.

****Job Bank applicants are exempt****

Employer Name: _____

Job Title: _____

Start Date: _____ / _____ / _____ Stop: _____ / _____ / _____

Rate of Hourly Pay: _____ Number of Hours per Week: _____

Job Duties: _____

Reason for Leaving (if **TERMINATED**, why?): _____

Employer Name: _____

Start Date: _____ / _____ / _____ Stop: _____ / _____ / _____

Employer Name: _____

Start Date: _____ / _____ / _____ Stop: _____ / _____ / _____

CONSENT FOR RELEASE OF INFORMATION

I authorize the release and/or communication of information pertaining to my applying to and if approved, participating on the TERO Workforce Development program. Information can be discussed with other Service Providers, i.e., but not limited to: TSS, Child Care facilities, Schools, Juvenile Services, Courts, Police, Probation Officer, and other provider Programs and Agencies. I understand that disclosure information can be: information on my application, duration of participation, training site(s), wages, job performance, etc. Additionally, information may be released for verification and determine eligibility for the program. INITIAL: _____

OPTIONAL – THE PROGRAM MAY DISCUSS MY APPLICATION WITH THE PERSON INDICATED BELOW.

Name: _____

Contact number or email address: _____

CERTIFICATION

I certify that the information provided in this application is true and correct to the best of my knowledge. I understand that all information provided is subject to review and verification and I may have to provide documentation to support this application. I am also aware that I am subject to immediate termination from the program if I am found ineligible after enrollment or approval to participate and may be prosecuted for fraud and/or perjury.

Applicant Signature

Date

Parent/Guardian

Date

NOTE: ORIGINAL APPLICATIONS ARE REQUIRED; EMAILED APPLICATIONS MAY BE ACCEPTED.

II. EDUCATIONAL PROFILE

Please share with us your educational background and highest educational level received.

Attach copies of your high school diploma or GED certificate.

☐ GED ☐ Some High School

☐ High School Diploma

School Name: _____ Graduation Date: _____

❖ *If you haven't obtained your high school diploma, would you be interested in receiving FREE training to obtain your G.E.D.?* ☐ YES ☐ NO

I am / have

☐ **Currently in** ☐ College or ☐ Trade School ☐ Full-Time ☐ Part-Time

School Name: _____ Years attended: _____

Course of study: _____

☐ **Some College or Trade School**

School Name: _____ Years attended: _____

Course of study: _____

☐ **Received Associates Degree**

School Name: _____ Years attended: _____

Course of study: _____

☐ **Received Bachelor's Degree**

School Name: _____ Years attended: _____

Course of study: _____

☐ **Other School**

School Name: _____ Years attended: _____

Course of study: _____

Certificate earned /Skill level: _____

Tell us about any specialized training, licenses and/or personal skills you have.

Attach copies of certificates and/or licenses. (List specialized training or licenses)

III. PERSONAL SKILLS SURVEY

Check all categories you feel applies to you.

Positives

- ☐ I am easy going/patient.
- ☐ I like to work: ☐ with people, ☐ alone OR ☐ either way
- ☐ I am responsible
- ☐ I maintain an organized work area
- ☐ I can multi-task
- ☐ I am good at keeping track of many details
- ☐ I take pride in the work I do
- ☐ I am flexible (can work a varied schedule/job duties & adjust to change)
- ☐ I understand confidentiality
- ☐ I am more: ☐ task oriented OR ☐ project oriented
- I prefer a* ☐ physical active *OR* ☐ stationary
- work environment that is* ☐ indoors ☐ outdoors *OR* ☐ either way

Challenges

- ☐ I cannot work: ☐ evening ☐ nights ☐ weekends
- ☐ I have trouble talking to people
- ☐ I have limited work experience
- ☐ I have no experience with computers
- ☐ I cannot travel.

Work Resources

- ☐ Do you have tools to work with? ☐ YES ☐ NO
- ☐ Do you have safety gear? ☐ YES ☐ NO
- I have (check all that you have) ☐ Work Boots ☐ Hard Hat ☐ Safety Vest

Please list any other resources you have: _____

IV. PARTICIPANT PROFILE

The information asked here is voluntary. If you are not comfortable with answering any or all of these questions, please skip.

VETERAN Status:

- ❖ Are you a veteran? ☐ YES ☐ NO
Branch of Service: _____
- ❖ Are you claiming Veteran's Preference? *(attach verification)* ☐ YES ☐ NO
- ❖ Were you Honorably Discharged? *(attach verification)* ☐ YES ☐ NO
- ❖ Are you a Disabled Veteran **or** the spouse of one? *(attach verification)* ☐ YES ☐ NO
- ❖ State the percent of disability. *(attach verification)* _____

Do you have TRANSPORTATION to get to work?

- ☐ I need transportation and can access EBCI Transit. ☐ YES ☐ NO
- ☐ Do you have a valid DRIVER'S LICENSE? ☐ YES ☐ NO
State issued / #: _____ *(If yes, please attach copy of current valid DL)*
- If NO, are you working on getting a Driver's License? ☐ YES ☐ NO
- ☐ Do you have a COMMERCIAL DRIVER'S LICENSE (CDL)? ☐ YES ☐ NO
State issued / #: _____ *(If yes, please attach copy of current valid CDL)*

Do you have or can you arrange for CHILDCARE?

- ☐ I do not need childcare to work.
- ☐ I need childcare to work.
- ☐ My children are in childcare at: _____
I pay \$ _____ per _____

What TYPE OF EMPLOYMENT are you seeking?

- ☐ Full-time ☐ Part-time ☐ Seasonal ☐ Temporary
- What type of hours are you willing to work? ☐ Days ☐ Evenings ☐ Nights
- Other: _____

We publish a monthly JOB OPENING LIST in the Cherokee One Feather.

- Do you want job information **MAILED** to you? ☐ YES ☐ NO
- Do you want job information **EMAILED** to you? ☐ YES ☐ NO

Please make sure that your mailing address is correct on page 1 and that you keep us informed of address updates.

V. OCCUPATIONAL SKILLS HISTORY / INTERESTS

Please review the various categories of occupations/occupational skills listed below.

☒ **MARK** all occupational skills that **you** have some experience and/or knowledge of. Keep in mind that experience / knowledge does not have to be from a paid source to be checked.

☒ **CHECK** all **occupations categories** (in the peach or gray blocks) that you are interested in.

☐ ADMINISTRATIVE/CLERICAL

- | | | | |
|--|-------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Office Telephones | <input type="checkbox"/> Typing | <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Receptionist |
| <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Accounting | <input type="checkbox"/> Procurement | <input type="checkbox"/> Supervisory |
| <input type="checkbox"/> Computer | <input type="checkbox"/> Copier | <input type="checkbox"/> Internal Controls | <input type="checkbox"/> Bank Clerk |

☐ COMPUTER

- | | | | |
|---|--------------------------------------|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> Windows | <input type="checkbox"/> Word | <input type="checkbox"/> Excel | <input type="checkbox"/> PowerPoint |
| <input type="checkbox"/> iOS (Mac) | <input type="checkbox"/> Pages | <input type="checkbox"/> Numbers | <input type="checkbox"/> Keynote |
| <input type="checkbox"/> Special Database | <input type="checkbox"/> Programming | <input type="checkbox"/> MS Publisher | <input type="checkbox"/> Access |

☐ CAREGIVER

- | | | | |
|--|----------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Infant/Toddler | <input type="checkbox"/> Youth | <input type="checkbox"/> Adult | <input type="checkbox"/> Disabled |
| <input type="checkbox"/> Senior Citizen(s) | <input type="checkbox"/> Elderly | <input type="checkbox"/> House Sitter | <input type="checkbox"/> Animal Caretaker |

☐ PUBLIC SAFETY

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Police Officer | <input type="checkbox"/> Fire & Rescue | <input type="checkbox"/> EMS | <input type="checkbox"/> Dispatcher |
| <input type="checkbox"/> 1 st Responder | <input type="checkbox"/> Volunteer Fire | <input type="checkbox"/> 1 st Aid/CPR | <input type="checkbox"/> Detention Officer |
| <input type="checkbox"/> Emergency Mgmt | <input type="checkbox"/> Emer. Shelter | <input type="checkbox"/> Emer. Operations | <input type="checkbox"/> Security Officer |

☐ MEDICAL

- | | | | |
|---|-------------------------------------|---|----------------------------------|
| <input type="checkbox"/> Patient Intake | <input type="checkbox"/> Scheduling | <input type="checkbox"/> CNA | <input type="checkbox"/> Dietary |
| <input type="checkbox"/> Terminology | <input type="checkbox"/> Billing | <input type="checkbox"/> Pharmacy | <input type="checkbox"/> X-Ray |
| <input type="checkbox"/> Lab Tech | <input type="checkbox"/> Dental | <input type="checkbox"/> Physical Therapy | <input type="checkbox"/> Nurse |

☐ TOURISM

- | | | | |
|---|---|---------------------------------------|---|
| <input type="checkbox"/> Waiter/Waitress | <input type="checkbox"/> Wait Staff Server | <input type="checkbox"/> Retail Sales | <input type="checkbox"/> Ticket Booth |
| <input type="checkbox"/> Salon/Spa/Barber | <input type="checkbox"/> Cashier/Cash Registr | <input type="checkbox"/> Tour Guide | <input type="checkbox"/> Acting/Drama |
| <input type="checkbox"/> Bartender | <input type="checkbox"/> Craft Demonstrator | <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Bus Boy |
| <input type="checkbox"/> Restaurant Host | <input type="checkbox"/> Fast Food | <input type="checkbox"/> Cook | <input type="checkbox"/> Sewing |
| <input type="checkbox"/> Front Desk | <input type="checkbox"/> Housekeeping | <input type="checkbox"/> Food Truck | <input type="checkbox"/> Food Delivery Driver |

☐ CRAFT ARTISAN

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Basket Artisan | <input type="checkbox"/> Beadwork Artisan | <input type="checkbox"/> Stone Carver | <input type="checkbox"/> Wood Carver |
| <input type="checkbox"/> Pottery Artisan | <input type="checkbox"/> Silversmith | <input type="checkbox"/> Paint/Graphic Artisan | <input type="checkbox"/> Native Resources Harvest'g |

☐ GROUNDS MAINTENANCE

- | | | | |
|--|-------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Push/Ride Mower | <input type="checkbox"/> Weed Eater | <input type="checkbox"/> Hedge Trimmer | <input type="checkbox"/> Power Saw |
| <input type="checkbox"/> Shredder | <input type="checkbox"/> Mulching | <input type="checkbox"/> Composting | <input type="checkbox"/> Landscaping |

V. OCCUPATIONAL SKILLS HISTORY / INTERESTS (CONTINUED)

☐ TECHNOLOGY

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Fiber Installer | <input type="checkbox"/> Cable Installer | <input type="checkbox"/> Electronic Tech | <input type="checkbox"/> Internet Tech |
| <input type="checkbox"/> Router Programmer | <input type="checkbox"/> Computer Program'g | <input type="checkbox"/> Telephone Installer | <input type="checkbox"/> Cellular Sales |
| <input type="checkbox"/> Website Developer | <input type="checkbox"/> DJ Radio Equipment | <input type="checkbox"/> Photography/Video | <input type="checkbox"/> Ham Radio |

☐ CONSTRUCTION OR INSTALLATION RELATED

- | | | | |
|--|--|--|--------------------------------------|
| <input type="checkbox"/> Masonry | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Roofing | <input type="checkbox"/> Carpentry |
| <input type="checkbox"/> General Laborer | <input type="checkbox"/> Native Stone | <input type="checkbox"/> Metal Buildings | <input type="checkbox"/> Brick/Block |
| <input type="checkbox"/> Retaining Walls | <input type="checkbox"/> Dry Wall | <input type="checkbox"/> Concrete | <input type="checkbox"/> Windows |
| <input type="checkbox"/> Skylights | <input type="checkbox"/> Electrical | <input type="checkbox"/> Pools | <input type="checkbox"/> Decks |
| <input type="checkbox"/> Ramps / Steps | <input type="checkbox"/> Doors | <input type="checkbox"/> HVAC | <input type="checkbox"/> Cabinets |
| <input type="checkbox"/> Counter Tops | <input type="checkbox"/> Security System | <input type="checkbox"/> Vinyl Siding | <input type="checkbox"/> Paneling |
| <input type="checkbox"/> Wallpaper | <input type="checkbox"/> Painting | <input type="checkbox"/> Guttering | <input type="checkbox"/> Fencing |
| <input type="checkbox"/> Flooring | <input type="checkbox"/> Tile | <input type="checkbox"/> Carpet | <input type="checkbox"/> |

☐ HEAVY/EQUIPMENT OPERATOR, MACHINERY, ELECTRIC TOOLS

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Dump Truck | <input type="checkbox"/> Trash Truck | <input type="checkbox"/> Tractor/Trailer | <input type="checkbox"/> Bus |
| <input type="checkbox"/> Fire Engine / Truck | <input type="checkbox"/> Ambulance | <input type="checkbox"/> Back Hoe | <input type="checkbox"/> Track Hoe |
| <input type="checkbox"/> Tow Truck | <input type="checkbox"/> Bucket Truck | <input type="checkbox"/> Grader | <input type="checkbox"/> Dozer |
| <input type="checkbox"/> Ditch Witch | <input type="checkbox"/> Jack Hammer | <input type="checkbox"/> Welding | <input type="checkbox"/> Generator |
| <input type="checkbox"/> Log/Wood Splitter | <input type="checkbox"/> Sander | <input type="checkbox"/> Tiller | <input type="checkbox"/> Circular Saw |
| <input type="checkbox"/> Nail Gun | <input type="checkbox"/> Band Saw | <input type="checkbox"/> Oxygen Tank(s) | <input type="checkbox"/> Trailer |
| <input type="checkbox"/> Lull | <input type="checkbox"/> Paving Equipment | <input type="checkbox"/> Soldering Iron | <input type="checkbox"/> Gas/Fuel Tanks |
| <input type="checkbox"/> Fuel Truck | <input type="checkbox"/> Delivery Truck | <input type="checkbox"/> Hand Truck | <input type="checkbox"/> Gator/Golf Cart |

☐ AUTO MECHANIC

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Tire Changing | <input type="checkbox"/> Tire Pressure | <input type="checkbox"/> Wheel Balance | <input type="checkbox"/> Brakes |
| <input type="checkbox"/> Transmission | <input type="checkbox"/> Oil Change | <input type="checkbox"/> Body Work | <input type="checkbox"/> Painting |
| <input type="checkbox"/> Window Tinting | <input type="checkbox"/> Detailing | <input type="checkbox"/> Engine Repair | <input type="checkbox"/> Starter |
| <input type="checkbox"/> Diesel Mechanic | <input type="checkbox"/> Exhaust | <input type="checkbox"/> Electric Motor | <input type="checkbox"/> Auto Heat/Air |

☐ MISC CERTIFICATIONS

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> OSHA | <input type="checkbox"/> CDL | <input type="checkbox"/> Laborer/Apprenticeship | <input type="checkbox"/> Facilities Maintenance |
| <input type="checkbox"/> Project Mgmt | <input type="checkbox"/> Flagging | <input type="checkbox"/> Surveyor | <input type="checkbox"/> Journeyman |
| <input type="checkbox"/> Court Reporter | <input type="checkbox"/> Pet Groomer | <input type="checkbox"/> Veterinary Assistant | <input type="checkbox"/> Forest Technician |
| <input type="checkbox"/> Culinary | <input type="checkbox"/> Chrke Stone Masonry | <input type="checkbox"/> | <input type="checkbox"/> |

Please list other **skills you have** that are not listed on this survey, if you did not clarify this on page 3.

Please list **other skills you are interested in** that are not listed on this survey. (Do not state the word "anything")



TERO WORKFORCE DEVELOPMENT COMPLIANCE AGREEMENT

I, _____, agree to the following while utilizing the TERO Workforce for job placement:

- *be at the job every day on time and ready to work;*
- *be a productive employee and show initiative to become a better employee;*
- *complete all assigned tasks as directed;*
- *work required number of hours;*
- *comply with all applicable rules and regulations of the employer;*
- *wear proper clothing and footwear and obtain equipment needed for a job;*
- *attend training as required by employer;*
- *always project the highest degree of professionalism;*
- *be Drug-Free; and*
- *once employed, contact the employer directly to communicate any issues I am having that will impact my time, attendance and/or performance.*

☐ I agree to adhere to the expectations listed above and will work to exceed them if possible.

☐ I agree to check in with the Workforce Development Coordinator on a regular basis.

☐ I agree that I will be removed from the Job Bank list if I refuse to answer or respond to three (3) calls made for job referrals by the TERO Workforce Development Coordinator.

Failure to adhere to any of these expectations and check in with the Workforce Coordinator will result in immediate removal from the Job Bank. A participant that has been removed may appeal the removal by writing a formal notice of appeal within thirty (30) days of removal. A participant that has been removed may submit another participation form after six (6) months.

Applicant Signature

Date

Parent/Guardian

Date

FOR OFFICE USE

Applicant assigned to: Job Bank ☐ WIOA ☐ NEWP ☐ GED ☐
Staff Initials: _____



TERO WORKFORCE DEVELOPMENT PARTICIPANT SURVEY

The following survey is an attempt to gather suggestions from Job Bank participants on how to better improve upon how you receive trainings and job referral services from the Tribal Employment Rights Office.

We coordinate with SCC on their “**Working Smart: Soft Skills for Workplace Success**” training. This training offers 5 training modules, teaching 16 lessons on soft skills over a period of 24 hours. Working Smart provides job seekers the tools to help you keep a job, excel at your job, and be more productive. The Topics are:

Self-Awareness Skills

Personal Branding
Self – Change
Cognitive Cycle

Self-Management Skills

Dealing with Stress
Warning Signs
Personal Reactions
Staying Calm & Clear

Work Ethics

Employer Expectations
Code-Switching

Communication Skills

Active Listening
Four C’s of Communication
Expressing Concerns
Handling Feedback

Problem Solving Skills

Problems and Goals
Facts vs. Opinions
Options and Outcomes

Do you want to take advantage of the **Working Smart training?**

☐ YES

☐ NO

Are you interested in receiving training/certification?

☐ YES

☐ NO

Do you need assistance with any of the following?

☐ NO

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Resume Writing | <input type="checkbox"/> Interviewing Skills | <input type="checkbox"/> Cover Letters | <input type="checkbox"/> Computer Skills |
| <input type="checkbox"/> Help filling out applications | <input type="checkbox"/> Work Tools | <input type="checkbox"/> Work Gear | |

Do you have interest in the following careers?

- | | |
|---|--|
| <input type="checkbox"/> Flagging | <input type="checkbox"/> Grant Writing |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Court Reporter |
| <input type="checkbox"/> Surveying | <input type="checkbox"/> Apprenticeship/Internship |
| <input type="checkbox"/> Project Management | <input type="checkbox"/> Other (Please list below) |

Is/Are there other training or certification(s) that you are interested in?



TERO WORKFORCE DEVELOPMENT PRE-EMPLOYMENT DRUG & ALCOHOL SCREEN

The Tribe has established requirements for applicants approved for participation in our Workforce Development Program. One of these requirements is submission to a pre-employment drug and alcohol screen resulting in a negative test result. Additionally, once you enter the program, you are subject to random testing for one or all of the following: drug usage, post-accident and reasonable suspicion as requested by your supervisor, program specialist, program supervisor, or manager.

Please read and initial each of the following statements:

_____ I have read the above statement, and I understand it.

_____ I understand that if I am selected to participate in the Workforce Development Program, I am required to be tested for drug/alcohol use.

_____ I understand that I am subject to random drug testing during the period of my participation in the program.

By signing below, I consent to drug screening in the form of collecting hair and/or urine samples and to the testing of such samples by a drug screening laboratory designated by the EBCI and TERO. I hereby consent to the release of the test results from the laboratory to a designated TERO agent. I release and discharge the EBCI and TERO, it's officers and agents, from any claim or liability arising from the use of such tests for any decisions concerning employment made by the EBCI and TERO based, in whole or in part, upon the results of such tests.

_____ Applicant Signature	_____ Date
_____ Parent/Guardian	_____ Date

NOTE: If you are qualified for and when you are approved for participation in the Workforce Development Program, you will receive notification from the TERO Office as to when you are scheduled for the drug and alcohol screening test. You will be notified of your results regardless of the status of your results.

****Job Bank applicants are exempt.****



TERO WORKFORCE DEVELOPMENT

NOTICE OF MANDATORY CRIMINAL HISTORY CHECKS

Federal law requires that a criminal history check be conducted on all individuals whose duties and responsibilities would allow them regular contact with or control over children. The Eastern Band of Cherokee Indians (EBCI) and affiliated entities (i.e., covered employers) also require that criminal history checks be conducted on all participants who will have regular contact and control with or control over children.

Covered employers will allow as a participant-trainee, only individuals who meet the standards of character-required individuals fitness to have responsibility for the safety and well-being of children as outlines in the Cherokee Code. Before you can be placed in an environment that is applicable, your background check must meet the standard for approval.

Your signature will indicate that you are now aware of the mandatory criminal records check as a condition of your participation in our program, if placed in a position or environment where a background check is applicable. You have a right to obtain a copy of the criminal history check that will be made available to the covered employer and the right to **challenge the accuracy and completeness** of the information contained in the report to the proper officials, not to the Program.

Please read and initial each of the following statements:

- ____ I am 18 years of age or older.
- ____ I authorize the Eastern Band of Cherokee Indians Tribal Employment Rights Office to perform a criminal history check in connection with my fitness to be an employee (regular or non-regular status) or volunteer for EBCI and all of its covered employers.
- ____ I understand that EBCI TERO Workforce Development Program shall not be held legally accountable in any way for providing my identifying information to any consumer credit agency, Federal Bureau of Investigation, state, local or tribal entities.
- ____ I release EBCI, including the TERO Workforce Development Program, from all liability, which may be incurred because of furnishing such information.
- ____ I authorize the release of any information, record, file or document requested by the EBCI from any private or public institutions, organizations, and governmental agencies.

All information may be furnished as if I, in person or in writing, make the request.

If the program places the applicant in an environment that requires a criminal history check, the applicant will be notified.

_____ Applicant Signature	_____ Date
_____ Parent/Guardian	_____ Date

YOU MUST INDICATE ANY CHARGES OR CONVICTIONS FILED AGAINST YOU, INCLUDING THE LOCATION, REGARDLESS OF THE OUTCOME, EVEN IF YOU HAVE NOT BEEN TO COURT YET.

____ a crime that involves a child (abuse of any kind)	____ Domestic Violence
____ a crime involving alcohol	____ a crime involving drugs
____ Assault (of any nature)	____ a conviction of a Felony
____ Larceny	____ Driving offenses: _____
OTHER JURISDICTION (TRIBE, FEDERAL, STATE): _____	OTHER OFFENSES: _____

****Job Bank applicants are exempt.****