

**Confederated Salish
&
Kootenai Tribes**

**Summer Youth Employment Programs//
Career Tracks**

Registration for
The 2009 Confederated Salish & Kootenai Tribes Summer Youth Employment Program:

Will start on Monday, March 16, 2009
And will end on Friday, May 15, 2009

Department of Human Resource Development (DHRD)
P.O. Box 278, Pablo, MT 59855
675-2700 ext. 1035

“Preparing Today’s Youth for Tomorrow’s Future”

2009 PRE-EMPLOYMENT DRUG TEST AGREEMENT

Date: _____ **Applicant’s Social Security Number:** _____ - _____ - _____

Applicant’s Name: _____

I certify that the information provided is true to the best of my knowledge. I am aware that the information I have provided is subject to review and verification and I may have to provide documents to support this application. I also understand that portions of this application may be released to prospective job sites to be used as a basis for possible employment.

I acknowledge that SYEP/Career Tracks is federally funded and per government guidelines I will be required to take a pre hire drug-test. The test will be scheduled through the SYEP/Career Track Coordinator at the DHRD office. I have been informed that a picture ID is required in my possession for the drug test.

I further acknowledge that my parent or legal guardian will be informed of the results for any drug test found positive. A positive drug test will make me ineligible for employment. A referral will be made on behalf of my parent/ guardian and me (applicant) to Mental Health & Addictions Program at Tribal Health & Human Services.

I agree to not start working in a SYEP/Career Track position until notified by the SYEP/Career Track Coordinator to do so. I further understand that if I do start work without approval any wages due me will not be paid by DHRD/SYEP/Career Track.

Applicant

Date

I, the undersigned responsible parent/guardian, have read the above statement and hereby give consent for my dependant to participate. I further understand that registration for the 2009 Summer Youth Program does not guarantee placement in the Summer Youth Employment Programs.

Parent or Legal Guardian

Date

(Signature required if youth is under age 18 and Not legally emancipated per 20 CFR Part 632.77 (C)).

DO NOT WRITE BELOW THIS LINE _____

SIGNED PRE-EMPLOYMENT DRUG TEST AGREEMENT RECEIVED BY:

SYEP/Career Track Coordinator

Date

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The Confederated Salish and Kootenai Tribes
Department of Human Resource Development

Dear Applicant:

Enclosed is your application for the 2009 Summer Youth Employment Programs. This booklet contains the necessary information and forms to assist you in registering for this year's program:

- Frequently Asked Questions
- 2009 Document List
- 2009 Summer Application and Instructional Guide
- 2009 Occupational List
- 2009 Pre-Employment Drug Test Agreement (The form requires your signature, and if you are under 18 years of age, your parent or guardian's signature is required.)

Carefully read and complete the 2009 Application and Pre-Employment Drug Test Agreement. Return the completed forms by Friday May 15, 2009. Our office is located in the Department of Human Resource Development Office in the Old Tribal Complex, and is open Monday – Thursday, 7:00 a.m. – 5:30 p.m. **When you return your application, you must bring documentation that includes; Proof of enrollment, Signed Pre-Employment Drug Test Agreement, Parent Income Verification, Social Security Card, Identification, and Grades or TABE Test.**

The **Summer Youth Employment Programs (SYEP)** is income based (per DOL Guidelines), and is for Tribal members or first descendants. The **Tribal Youth Career Track Program (CT)** is for high school students, grade freshman to senior is not income based; it is GPA based 2.5 or better. Income information is required for statistical assessment. This is only eligible to CS & KT enrolled members who are high school students. CFR, Workforce Investment Act, Part 664-Youth Activities.

The ultimate responsibility for the selection of participants and the maintenance of participant record rests with DHRD & Summer Youth Employment/Career Track Program Coordinator/s. (CFR 632.77 (b)) The eligibility determination shall be based upon a completed application which records all information necessary to determine eligibility, which attests that the information on the application is true to the best of the applicant's knowledge and acknowledging that such information is subject to verification and that falsification of the application shall be grounds for the participants termination and may be subject to prosecution under law. (CFR 632.77 (c))

We look forward to working with and for you this summer. Should you have any questions regarding registration, please contact the Department of Human Resource Development Office at 675-2700.

Frequently Asked Questions

Q1. I registered for the 2008 Summer Youth Employment Program last year, am I Required to register for this year's program?

A1. Yes

Q2. What are the eligibility age requirements for the 2009 Summer Youth? Employment Program?

A2. To apply for the program, you must be a Youth at ages 14-24. Youth who are 13 Years old, must turn 14 by the start of the program, which is Monday, June 15, 2009.

Q3. I am 24 years old and will turn 25 on June 23, 2009. Am I eligible to apply for The 2009 Summer Program?

A3. No, individuals who turn 25 on or before the start of the program, Monday, June 15, 2009, are not eligible to participate.

Q4. How do I apply for the 2009 Summer Youth Employment Program?

A4. Complete the enclosed 2009 Summer Youth Employment Application; have your parents or guardian sign the 2009 Pre-employment drug test agreement (if you are a minor); and bring both forms and the required documents to:

**Department of Human Resource Development (DHRD) Office
Old Complex/ Upstairs
51383 Hwy 93
Pablo, MT 59855**

Students currently in grades 7-12 must bring their most recent report card. If they do not have a report card they can bring in a current (within the past year) TABE test.

Q5. What documents are required?

A5. See the enclosed "2009 Document List."

Q6. If I complete the 2009 Summer Youth Employment Program Application and Return it along with the Pre-employment drug test agreement and the required Documents to the Office of Youth Programs before the deadline, am I Guaranteed a summer experience?

A6. No. The program does not guarantee a summer experience to every youth who applies. However, early submission of an application greatly enhances your chances of securing a summer assignment.

Q7. What is the deadline for submitting the 2009 Summer Youth Employment Application and Pre-employment drug test agreement?

A7. Friday May 15, 2009.

Q8. Should I mail the completed application to the Department of Human Resource Development Office?

A8. No. We will not accept applications received through the mail, or faxed. It must be submitted in person because of the required attachments.

Q9. If I am selected for a summer experience, how will I be notified?

A9. Notification of acceptance will be mailed to the address that appears on your application.

Q10. When does the 2009 Summer Youth Employment Program begin?

A10. The program begins on June 15, 2009 and ends on July 25, 2009.

Q11. How much will I be paid?

A11. You will be paid the federal minimum wage of \$6.55 per hour.

Q12. Can I be assigned to the same training site I had last summer?

A12. The Department cannot guarantee that you will be assigned to the same site. However, the worksite supervisor can submit a request for you to return, but it must be submitted to the Department of Human Resource Development Office by Friday, May 15, 2009.

Q13. Can the supervisor request a time extension of hours?

A13. No, Because DHRD supports the minimum wage increase. DHRD cannot provide extended work periods.

Q14. What number can I call if I have any questions or concerns?

A14. The telephone number is (406)675-2700 extension 1035.

Q15. Will SYEP provide transportation to and from the work site?

A15. No. The parent, guardian, or person responsible for the child's needs to provide transportation to and from the work site.

Q16. Why would I need to complete paperwork for a policy report and background check?

A16.

Anyone 18 and older who will be working with elders or children will be required to complete a background check.

Document List


Please be sure to return your completed 2009 Summer Youth Employment Program Application to the Department of Human Resource Development Office, along with documentation to verify the following.

- **Proof of Enrollment-** Copy of Tribal I.D., or proof of 1st generation descendant status in the form of a letter from a Federally Recognized Tribe.
- **Pre-employment Drug Test Agreement**
- **Parents Income Verification-** copy of check stubs for last 6 months
- **Social Security Card-** Copy of SS Card (is an I.D.)
- **Identification-** 2 forms of I.D. required- 1 copy of picture I.D. 1 copy of SS card or Birth certificate.
- **Grades or TABE Test-** Youth who are in school on the secondary level (grades 7-12) must submit their most recent report card. If you are not in school you must take a TABE test. These can be taken at the Adult Learning Center at SKC or contact Doreen Bingham at 275-4986.

Reminder

Registration for the 2009 Confederated Salish & Kootenai Tribes Summer Youth Employment Program will start on Monday March 16, 2009 and end on Friday, May 15, 2009.

Applicant: #1-5 will be completed *after* job placement.

- \$  1) ___ Drug test appointment/results (before you start work)
- \$ 2) ___ Form W-4 – (will complete when placed at job site)
- \$ 3) ___ Form I-9- (will complete when placed at job site)
- \$ 4) ___ Emergency Notification Card- (will complete when placed at job site)
- \$ 5) ___ Designation of Beneficiary- (will complete when placed at job site)

You cannot be placed in CSKT's payroll system

If any one of the above documents are missing or is incomplete.

The office is open Monday – Thursday, 7:00 a.m. to 5:30 p.m. For more information, please call (406)675-2700 extension 1035.

Instructions for Completing the 2009 SYEP Application

- 1. Last Name:**
Please enter your last name as it appears on your Social Security card in the boxes provided.
- 2. First Name:**
Please enter your first name as it appears on your Social Security card in the boxed provided.
- 3. M. I.: (optional)**
Please enter your middle initial as it appears on your Social Security card in the box provided.
- 4. Gender:**
Please enter your gender as it appears on your birth certificate in the boxes provided.
- 5. Mailing address:**
Please enter your mailing address.
- 6. Apartment Number:**
If you live in an apartment, please enter the apartment number in the boxes provided.
- 7. City:**
Please enter the city in which you live as it appears on the document(s) used to verify your address.
- 8. State:**
Please enter the abbreviation for the state in which you reside, for example, MT, WA, or ID, as it appears on the document(s) used to verify your address.
- 9. Zip Code:**
Please enter your zip code as it appears on the document(s) used to verify your address.
- 10. Social Security Number:**
Please enter your Social Security Number as it appears on your Social Security Card in the boxes provided.
- 11. Date of Birth:**
Please enter the month, day, and the last two numbers of the year of your birth, as it appears on your birth certificate in the boxes provided.
- 12. Phone Number:**
Please enter your home phone number, including the area code, in the boxes provided.
- 13. E-mail Address: (optional)**
Please enter your email address in the boxes provided.
- 14. Emergency Contact:**
Please enter the name, phone number, and relationship of an emergency contact Individual in the space provided.

15. Current Educational Status:

Please place a check mark in the box that applies to you. See page 11 for the Definitions of Educational Status Terms.

16. Income Status: Is your household receiving any of the following sources of income?

Please place a check mark in any box that applies to your household. See page 11 for Definitions of Income Status Terms.

17. Gross Family Income- Gross Family Income refers to the total amount of all sources of income before taxes for each individual who resides within the household who is related to you by blood, marriage, or adoption.

18. How many people are living in your household, including yourself?

Enter the total number of individuals, including yourself, residing in your Household who are related to you by blood, marriage, or adoption.

19. Tribal Status:

Please place a check mark in the box that applies to you and if applicable complete either enrollment number or Name of Tribe.

20. Have you ever been incarcerated?

Please place a check mark in the space provided if you have ever been incarcerated.

21. Are you currently on Probation?

If you are on Probation, please place a check mark in the space provided.

22. Are you a foster child?

Please place a check mark in the space provided if you are a foster child.

Foster child- A child or youth who resides with an individual other than his or her natural or adoptive parents, in a court or the child welfare agency approved home, where the state or local government payments are made.

23. Are you currently residing in Second Circle?

Please place a check mark in the space provided if you are currently residing in Second Circle.

24. Are you taking medication?

Please place a check mark in the space provided if you are on medication.

25. Occupational Interest: (See the 2009 Position Title List)

Please select and enter three occupations from the 2009 Position Title List in the spaces provided. However, assignments are subject to the availability of openings.

26. Any Disabilities or Impairments?

Please place a check mark in the box that applies to you. If you answer yes, please provide a medical statement. This will be placed in a "Confidential Envelope" and put in your file.

27. Selective Service: (males 18 and older)

Please place a check mark in the appropriate box. If you answer yes, please enter your Selective Service Number in the space provided.

2009 Position Title List

Position Title

ACCOUNTING SPECIALIST ASSISTANT
CHILD CARE
CHILD CARE ASSISTANT
CHILD CARE PROVIDER AIDE
CLERICAL
CLERK/AIDE
CLERK/CASHIER
COOK HELPER
CURRICULUM ASSISTANT
CUSTODIAL
CUSTOMER SERVICE REPRESENTATIVE
FILE CLERK
FITNESS ASSISTANT
GIFT SHOP SALES CLERK/TOUR GUIDE
GREEN HOUSE AIDE
GREENSKEEPER
GROUND MAINTENANCE
GROUNDS KEEPER
HOUSEKEEPING
JANITORIAL
JANITORIAL/NIGHT SHIFT
LABORER
LABORER MAINTENANCE
LABORER/GROUNDS KEEPER
LIBRARY AIDE
LIFE GUARD & SWIM INSTRUCTOR
MAINTENANCE WORKER
MEDICAL RECORDS FILE CLERK
OFFICE AIDE
OFFICE ASSISTANT
OFFICE CLERK
OUTDOOR MAINTENANCE
PATIENT REISTRATION FILING CLERK
PERMITTING AND LEASING
PREP COOK/ DISH WASHER
PROPERTY/SUPPLY AIDE
RECEPTIONIST
SECRETARY
STORE CLERK
WAREHOUSE HELPER
WILDLAND RECREATION AIDE
YARD WORK

Definitions of Educational Status Terms

Drop out- An individual who is no longer attending any school and who has not received a secondary school diploma or its recognized equivalent.

Attending High School or Less- An individual who has not received a secondary school diploma, or its recognized equivalent, and is attending any school, including elementary, intermediate, junior or high school, secondary or alternative school, whether full or part-time.

Completed High School/ GED (not attending school) - An individual who has graduated from an accredited high school or received a General Education Development Diploma.

Attending Post Secondary Education- An individual who is currently registered in a program at an accredited degree-granting institution or apprenticeship program, pursuing an industry recognized credential/certificate.

Vocational/Advanced Training- An individual who is attending a technical/vocational institution or apprenticeship program, pursuing an industry recognized credential/certificate.

School Name/ Current Grade- If you are attending school on the secondary level please enter your School Name and Current Grade in the spaces provided. If you have completed high school or received a GED and not enrolled in advanced training beyond the secondary level, please enter "Graduate" in the space provided for Current Grade. If you are attending college, please enter the name of the college in the space provided for School Name, enter your year/classification in the space provided for Current Grade, and enter your major field of study in the space provided for College Major. If you dropped out of school, enter the highest grade completed prior to leaving school.

Definitions of Income Status Terms

TANF- Temporary Assistance for Needy Families is a government program that provided cash assistance and supportive services to assist families and help them achieve self-sufficiency.

Tribal TANF- Assistance for Needy Families is a government program that provided cash assistance and supportive services to assist families and help them achieve self-sufficiency. At least one household person must be CS&KT enrolled.

Food Stamps- The Food Stamp Program is a government program that enables low-income families to buy nutritious food with coupons and Electronic Benefits Transfer (EBT) cards.

Tribal General Assistance- General Assistance provides financial assistance to single adult who are enrolled or ¼ descendant of a federally recognized tribe and living on the Flathead reservation.

Other Income-

- Social Security- Benefits paid to a retired individual or survivor's benefits for the retiree's spouse and children, whose employment is covered by Social Security.
- Social Security Disability Insurance (SSDI) - Disability benefits are payable to blind or disabled workers, widow(er)s, or adults disabled since childhood, who are otherwise eligible.
- Supplemental Security Income (SSI) - benefits payable to adults or children who are disabled or blind, have limited income and resources, meet the living arrangement requirements, and are otherwise eligible.
- Employment- attach a copy of last 6 months pay check.