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Native Employment Works Program Application

Please allow 14 business days to process completed applications. If the application is incomplete or missing required verifications, you will receive notification. Applications are only valid for 30 calendar days. If you fail to provide the required verification's you must reapply.

Eligibility Criteria:

Oneida Nation enrolled members that are without dependent children and who are not a non-custodial parent, residing within Brown and Outagamie Counties; other enrolled Native Americans residing within the Oneida Reservation Boundaries. Assistance is available for unemployed, underemployed and employed whose income is at or below of the required 185% of the Federal Poverty Level. Benefits/services are subject to funding availability.

ALL APPLICANTS MUST PROVIDE REQUIRED VERIFICATIONS:

- Tribal Enrollment verification (Tribal ID or enrollment letter)
- Verification of address dated within the last 30 days (must be residing in Brown or Outagamie Counties)
- Verification of all household income for last 30 days (Earned and Unearned)

Request for service of Auto Repair, Auto Insurance, Work Clothes/Shoes, Tools, Fuel, Transit Pass - Must be employed 20 hours week and provide the following:

- Auto Repair - Two (2) estimates from ASE certified auto repair services (unless vehicle is not safe to drive then only one (1) must be noted on estimate), Driver's License, Vehicle Registration.
- Auto Insurance - Two (2) 6-month insurance quotes (no online quotes or renewal notices), Driver's License
- Work Clothing/Shoes, Tools, Fuel, Transit Pass - Verification of new employment from employer on letterhead (listing contact information, start date, wage, hours, and pay frequency, list of required tools, clothing, shoes, etc. needed) or Employment Verification of Earnings (EVFE) must be submitted if letterhead not obtained

Request for service of Driver's License Fees, AODA Assessment, GED/HSED, and Training Fees – No Employment Required

- Verification of Short-Term Training Fees (less than 10 weeks)
- Verification of Court-Ordered AODA Assessment
- Verification of Group Dynamics
- Verification of GED/HSED testing fees from approved Institution
- Verification from DMV of Driver's License Reinstatement and or exam fees

Native Employment Works Program Application
CHECK ALL SERVICES YOU ARE APPLYING FOR



OFFICE USE ONLY
 Received _____
 Documents needed _____

 Intake _____
 Caseworker _____

- | | | |
|---------------------------------------------------------------|-----------------------------|--------------------------|
| AODA Assessment | Driver's License Fees | Group Dynamics Safety |
| Work Clothing/Shoes | Work Tools | Short-Term Training Fees |
| HSED/GED Fees | Prescription Safety Glasses | Transit Pass |
| Fuel Assistance | Auto Insurance | Towing Expense |
| Auto Repair, List how many vehicles owned in household: _____ | | |

Do you have any minor children? Yes No Are you currently ordered to pay child support? Yes No
If you have answered yes to this question, STOP and complete TANF Diversion Application

APPLICANT INFORMATION				
Last Name	First Name	M.I.	Date of Birth	
Physical Address			Apartment/Unit #	
City		State	ZIP	County
Mailing Address			Apartment/Unit #	
City		State	ZIP	Tribal Affiliation:
Phone Number	E-Mail:	Enrollment #		
Social Security #	Driver's License #		U.S. Citizen: Yes No	
Marital Status (circle one): Single/Never Married Married Living Together Married Separated Divorced Widowed				
Do you live on the reservation: Yes No How long have you lived at this address:				
Sex: Female Male	Are you a Veteran: Yes No	Highest grade level you completed:		
Current source of income earned/unearned list all:				

Please Provide Statement Below

Briefly describe your current situation and what you are requesting from the program:

List <u>ALL</u> Household Members				
Full Name	Relationship	Monthly Income	Do they cost share expenses	Tribal Affiliation

List ALL Household Income – Earned or Unearned			
Name	Source of Income Earned/Unearned	Amount	How Often

New Employment Information				
Applicant Name	Employer Name/Address	Start Date	Rate of Pay & Hours	Pay Frequency

CURRENT VEHICLE OWNERSHIP – complete if applying for auto repair				
Applicant Name	Make, Model, and Year of Vehicle	Registration	Insurance Provider	How long you own?

Career Objective, Education, Skills	
Do you have a current resume?	
Are you interested in mock interviews?	
Are you interested in additional training?	
What are some career skills you currently have?	
Do you have any career goals?	
What are some obstacles you may have that is preventing you from reaching your career goals?	

CONSENT FOR RELEASE/DISCLOSE & SIGNATURE	
<p>I consent to release any and all information necessary for the determination of benefits to be made on my behalf, and to the Oneida Nation Economic Support Agency and Community Support. I understand this release may include, but not limited to, any information regarding income, salary, benefits, and disability. I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application will result in denial of benefits.</p>	
Applicant Signature:	Date:

OFFICE USE ONLY					
Application Status:	Approved	Denied	Pending	Pre-Employment	Employment
Comments:					
Staff Signature:					Date: