

# GIKENDAASOWIN

## LAC DU FLAMBEAU TRIBAL EDUCATION OFFICE

Education Director 715-588-7543 Administrative Assistant 715-588-7925

P.O. Box 189, Lac du Flambeau, WI 54538

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### DIRECT EMPLOYMENT GUIDELINES

1. Applicants must be enrolled or eligible for enrollment in the Lac du Flambeau Band of Lake Superior Chippewa Indians.
2. Applicants must be unemployed or underemployed for at least two months prior to receiving direct employment funding. Financial assistance shall not be used to supplement the income of a person already employed. Underemployed is defined as “having less than a full-time or adequate employment in the economy in which the individual resides in.” Written documentation shall be provided explaining why the applicant feels he/she is underemployed.
3. Employment must be verified before assistance can be disbursed. Verification must be done prior to departure if relocating. Verification from the employer included the following:
  - ◆ Job title
  - ◆ Beginning wage
  - ◆ Starting date of employment
  - ◆ First payday
  - ◆ First full payday
  - ◆ Statement verifying the permanent nature of the job
4. Applicants are only eligible for funding two times under the Direct Employment.
5. All monthly income (e., taxable income, Social Security, Pension, Unemployment Compensations, etc.) will be deducted from the total amount of allowable need. Monthly income is defined as the income received thirty (30) days prior to the date the application is received in the Lac du Flambeau Tribal Education Office. The difference between the applicant’s allowable need and the monthly income is the amount the applicant is eligible to receive. The maximum allowable Direct Employment funding is \$1,500.00.
6. Financial assistance may be disbursed for transportation and subsistence en route to employment location, subsistence for one month or until the first paycheck from employment is received, up to six months of emergency assistance and supportive services. Supportive services include tools for employment, initial union dues, transportation household effects, security and safety deposits, personal appearance and house wares or employment counselors engaged in providing services to applicants. The dollar amount allowed for the above items is contained in a table of allowable expenses. *\*\*\*Maximum Direct Employment funding, including these services is \$1,500.00.*
7. Direct Employment recipients are not eligible to receive Job Placement and Training and Higher Education services in the same year the recipients were granted the Direct Employment services.

8. The following documents must be on file in the Lac du Flambeau Tribal Education Office before any financial assistance is disbursed:

- ◆ Direct Employment application
- ◆ Employment Assistance application
- ◆ Verification of employment
- ◆ Verification of monthly income
- ◆ Itemized list of expenses
- ◆ Addresses of all individuals engaged in the relocation process, as requested by the LdF Tribal Education Office
- ◆ Employment update statement

9. The services of the Lac du Flambeau Tribal Education Office will be offered to those who do not qualify for education monies from the Lac du Flambeau Tribe.

- ◆ Quoted directly from the Federal Regulations

Please contact the Education Office if you have any questions

# DIRECT EMPLOYMENT APPLICATION/DATA SHEET

Name of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Employer/Company Name \_\_\_\_\_

Employer full Address \_\_\_\_\_

Employer phone \_\_\_\_\_

Contact person \_\_\_\_\_

What department is contact person in? \_\_\_\_\_

Your S.S. Number \_\_\_\_\_ Start Date \_\_\_\_\_

Your Job Title \_\_\_\_\_ Rate of Pay \_\_\_\_\_

1<sup>st</sup> Paycheck date and amount \_\_\_\_\_ 1<sup>st</sup> Full Paycheck date and amount \_\_\_\_\_

List all other income and services you currently receive: (food stamps, TANF, SSI, Adult Vocational Services)

## Office Use Only (VERIFICATION)

Is this a full time \_\_\_\_\_ yes \_\_\_\_\_ no Explanation: \_\_\_\_\_

Is this permanent \_\_\_\_\_ yes \_\_\_\_\_ no Explanation: \_\_\_\_\_

Start date \_\_\_\_\_ 1<sup>st</sup> full paycheck \$ \_\_\_\_\_ Rate of pay \_\_\_\_\_

Contact Person Information (Name, position, department, phone number) \_\_\_\_\_

Approved: \_\_\_\_\_ yes \_\_\_\_\_ no Explanation: \_\_\_\_\_

Direct Employment \_\_\_\_\_ Relocaiton funds \_\_\_\_\_ Tools \_\_\_\_\_ Days of eligibility \_\_\_\_\_

Number of dependents \_\_\_\_\_ LDF enrollment number \_\_\_\_\_

Comments: \_\_\_\_\_

Amount of Eligibility\$ \_\_\_\_\_

Signature \_\_\_\_\_

Today's Date \_\_\_\_\_