



Last Name: _____ First Name: _____ MI _____

Street Address: _____

City _____ State _____ Zip _____ Phone Number: (____) _____ - _____

Email Address: _____ Birth Date: _____ (mm/dd/yyyy)

Social Security # _____ Date of Application: _____

Preferred Contact: Check one

- Phone Message/Cell Email

Gender:

- Male Female Not Specified

Citizenship: Check one

- (C) US Citizen (A) Registered Alien
 (R) Refugee (L) Other Legal Alien
 Other Specify _____
ID#: _____ Type: _____

Do you have a Driver's License? Yes No

Ethnicity Hispanic/Latino:

- Yes No Not Specified

Race: (Check all that apply)

- American Indian Hawaiian/Pac. Islander
 Asian White
 Black Hispanic
 More than One Race Not Specified

Are you registered with Selective Service? Yes No

Selective Service Number: _____
Go to <http://www.sss.gov/records.htm> for Selective Service Number.)

Are you a Veteran? Yes No
 (L) Less than or equal to 180 days active service
 (G) Greater than/equal to 180 days active service

Are you a Disabled Vet? Check one
 (N) No (D) Disabled (S) Special Disabled

Are you a Recently Separated Veteran (Within the last 36 months)? Yes No

Are you a Campaign Veteran? Yes No

Enlist Date: _____

Discharge Date: _____

Branch: _____

Education: (Choose One)

- 8th Grade or Under 9th – 12th Grade
 High School Graduate or Equivalent (GED)
 1-4 years of College, or full-time tech or voc school
 Associate's Degree
 Bachelor's Degree

What is the highest grade you completed? _____

If you attended college, what type of degree(s) did you obtain? _____

Employment Status at Enrollment:

- Employed Not Employed
 Employed but received Notice of Termination

Name of current Employer: _____

What is your current job title? _____

What is your current salary (annual or hourly)?

Annual: _____ Hourly: _____

What type of training are you requesting through the Sectors Grant?

Other Demographics: (Check all that Apply)

- Limited English Proficient
 Individual with a Disability
 Unemployed Individual Dislocated Worker
 Incumbent Worker High School Dropout

Industry in which you plan to enter upon completion of training: (Check only one – Consult Case Manager with questions)

- Worker impacted by National Energy & Environmental Policy _____ Initial

This category includes individuals who: 1) are currently employed in an occupation in the utilities; transportation and warehousing; manufacturing; construction; mining, quarrying, and oil and gas extraction; or other sectors that have been adversely affected by national energy and environmental policies; and have received a notice of termination or lay-off from employment; or 2) were employed in an occupation in the utilities; transportation and warehousing; manufacturing; construction; mining, quarrying, and oil and gas extraction; or other sectors that have been adversely affected by national energy and environmental policies; and are now unemployed.

- Individual in Need of Updated Training Related to the Energy Efficiency and Renewable Energy Industry _____ Initial

This category includes individuals who are currently employed; or were terminated or laid-off or have received a notice of termination or lay-off from employment; or were self-employed but are now unemployed; and can benefit from training that will help them enter or advance in the energy efficiency and renewable energy industries identified in WIA section 171(e)(1)(B)(ii), and/or will enable them to acquire or enhance skills needed to enter occupations within one or more of the “growth, enhanced, and emerging” green industries in accordance with the funding opportunity in which the grant was awarded.

- Individual Seeking Employment Pathways Out of Poverty & into Self-Sufficiency _____ Initial

This category includes individuals who reside in high poverty areas, which are areas where the poverty rate is 15% or greater, who demonstrate that they could benefit from skill training that will help them enter or advance in the energy efficiency and renewable energy industries identified in WIA section 171(e)(1)(B)(ii), and/or will enable them to acquire or enhance skills needed to enter occupations within one or more of the “growth, enhanced, and emerging” green industries in accordance with the funding opportunity in which the grant was awarded.

- Individual with a Criminal Record _____ Initial

This category includes individuals who are or have been subject to any stage of the juvenile or criminal justice process, for whom services under this Act may be beneficial; or who require assistance in overcoming artificial barriers to employment resulting from a record of arrest or conviction. ETA includes individuals with a juvenile or criminal record in the definition for this term.

Industry in which you plan to enter upon completion of training: (Consult Case Manager)

- (11) Agriculture, Forestry, Fishing & Hunting
- (21) Mining, Quarrying, & Oil & Gas Extraction
- (22) Utilities
- (23) Construction
- (31-33) Manufacturing
- (42) Wholesale Trade
- (44-45) Retail Trade
- (48-49) Transportation & Warehousing
- (51) Information
- (52) Finance & Insurance
- (53) Real Estate Rental & Leasing
- (54) Professional, Scientific, & Technical Services
- (55) Management of Companies & Enterprises
- (56) Administrative & Support and Waste Management & Remediation Services
- (61) Educational Services
- (62) Health Care & Social Assistance
- (71) Arts, Entertainment, & Recreation
- (72) Accommodation & Food Services
- (81) Other Services (except Public Administration)
- (92) Public Administration

Green Industry Sector:

- Energy-Efficient Building, Construction, & Retrofit
- Renewable Electric Power
- Energy Efficient & Advanced drive Train Vehicle
- Biofuels
- Deconstruction & Materials Use
- Energy Efficiency Assessment (serving residential, commercial, or industrial sectors)
- Manufacturers that produce sustainable products (using environmentally sustainable processes and materials)
- Other Green Industries

Follow up Information: This should be a person who does NOT live with you, but knows how to contact you if you move or relocate.

Name: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Phone: (_____) _____ - _____

I certify that the information contained in this application is true to the best of my knowledge. I am aware that this information is subject to review and verification and that I may be required to provide documentation in its support. I am also aware that I am subject to immediate termination from the program if I am found to be ineligible after Hawaii SESP Grant

All Information is Confidential

enrollment and may be prosecuted if the information I have provided is false. I authorize the release of information contained in this application for use in verifying my eligibility for WIA programs; however, I understand that the information will not be released for any purpose other than to authorized state or federal personnel for monitoring purposes.

I have been informed of the appeals process I can follow if I disagree with a WIA service provider's decision, based on information contained in this application. I have read and understand Section 34.23(a)(5) of Title 29 CFR, Equal Opportunity is the Law.

Equal Opportunity Notice – As a condition to the award of financial assistance from the Department of Labor under Title 1 of WIA, the Rural Workforce Consortium assures that it will comply fully with the nondiscrimination and equal opportunity provisions of the following laws:

Section 188 of the Workforce Investment Act of 1998 (WIA), which prohibits discrimination on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and against beneficiaries on the basis of either citizenship/status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIA Title 1- financially assisted program or activity;

Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the basis of race, color and national origin;

Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination against qualified individuals with disabilities;

The Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age; and, Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex in the educational programs.

I have also been informed that WIA is required by Public Law 107-288, section 2(a) of the Jobs for Veterans Act 38 U.S.C. 4215 (a) to give priority of service to veterans (and some spouses) “who otherwise meet the eligibility requirements for participation” in DOL training programs.

If I am employed, in compliance with the Family Education and Rights to Privacy Act (FERPA), I authorize the release of information between my employer, the _____ One-Stop Center, the Hawaii Department of Labor and Industrial Relations, and the _____ Community College to include: demographic information including Employment Eligibility Verification information (copies of I-9 verification such as State ID and Social Security Card), attendance records, test scores and certifications earned through participation in the training programs through the _____ Community College.

All information will remain secure and confidential and used solely for state and federal reporting purposes.

Applicant Signature

Parent/Guardian Signature

Date of Signature

Date of Signature

Case Manager Use Only:

Intake/Case Manager Signature _____ **Date:** _____

Date of Eligibility _____ **Office:** _____

This grant is funded by the Workforce Investment Act and American Recovery and Reinvestment Act of 2009

