



The Youth Employment Program (YEP) provides eligible clients, ages 14 to 24 years old, with an opportunity to receive employability training services. Participants are placed at worksites for an 8-week period (up to 40 hours per week) and receive a pay rate of \$12.00 per hour. An extension may be granted should the worksite request additional employment services and funding is still available. Only one service can be provided per 6 months. Participants who apply for the program must provide a recent grade report showing they are passing classes to be deemed eligible for the program. If a student is failing, they will be redirected to our CRT Program for tutoring or summer school. There will be an incentive award of \$10/hr. for seat time in tutoring sessions/summer school. **Participants must pass urine analysis drug screening.**

Incomplete applications not accepted nor held.

All YEP applications processed on a first come, first serve basis

Supporting Documentation Required:

- ❖ **Picture Identification** (School Photo ID/OK DL/ State ID/Birth Certificate)
 - *CDIB cards do not count as a form of picture identification*
- ❖ **Tribal Enrollment** (Certified of Degree of Indian Blood Card or Tribal Census Letter)
- ❖ **Social Security Card** (Required for payroll processing; tribal letters with SS on it do not count)
- ❖ **Report Card** (Applicants are **required** to be enrolled in school; only one copy; **Official transcripts** for college students)
- ❖ **Direct Deposit Information**
- ❖ **Resumé** (if applicable)

Session Applying For: () Summer () Fall () Spring

Questions or Concerns? Please contact us:

OFFICE PHONE: 580-492-3257

OFFICE EMAIL: Workforce@comanchenation.com

Revised: 3/31/2023

Comanche Nation Workforce

YEP Application

General Information

Have you ever participated in the Youth Employment Program? Yes No

If yes, where were you placed? _____

If no, where would you be interested in being placed? _____

Employability Development Plan of the Y.E.P.

- To promote self-esteem and develop proper work ethics in the work environment.
- To introduce Native American Youth into the world of work and gain work experience.
- To introduce Native American Youth to new skills acquired at different worksites.
- To help Native American Youth determine their career objectives and plan future goals.
- To establish a foundation of leadership, professionalism, and determination among youth.

Responsibilities of the Youth Employment Coordinator

- Attitude, safety, punctuality, and appropriate dress will be greatly emphasized according to the corresponding worksites.
- Interest of individuals will be obtained for placement at worksites referencing their interest.
- Workshops will be available and utilized to promote the growth of personal, professional, career, leadership, and cultural development.
- Daily check-ups will be utilized to ensure that the participant is in attendance and completing his/her tasks/duties at corresponding worksites.

Responsibilities of the Youth

- ✓ Each participant will complete and sign the following documents for accounting and payroll purposes: **I-9, W-4 (may need parental guidance and understanding), MIS (x2)**
- ✓ Each participant will be expected to maintain a good attendance while at the worksite.
- ✓ Each participant will be expected to follow all rules and regulations related to the YEP.
- ✓ Each participant will be required to attend all Workshops that the program will offer.
- ✓ Each participant will be expected to fully complete the eight (8) week program.

It is very important that you fulfill your program obligations. All items listed above will be discussed in full detail at the YEP Orientation. Participants who are fully involved in other activities which may hinder them from being at their worksite majority of their 8-week period, must decide if they choose the YEP fully and will be committed. If not, please allow another youth to have a chance.

Signature of Youth: _____ Date: _____



Comanche Nation Workforce
 Mailing: P. O. Box 908/Physical: 1608 SW 9th St.
 LAWTON, OK 73502 LAWTON, OK 73501
 Office: (580) 492-3257/(580) 492-3644
 Fax: (580) 492-3770

YEP INTAKE RECORD

REV 10/4/2022

FOR OFFICE USE ONLY
DATE & TIME OF INTAKE:

2 SOCIAL SECURITY NO. _____ 3 GENDER (Circle One) MALE FEMALE 4 BIRTHDAY _____ 5 AGE _____ 6 LAST NAME _____ 7 TELEPHONE NO. _____

8 MARITAL STATUS (circle one) 1. Single 2. Married 3. Divorced 4. Widowed 5. Separated 6. Common law	9 EDUCATIONAL STATUS (circle one) 1. In School, H.S. or less 2. In School, Post H.S. 3. College Student 4. Home School 5. Not In School	10 SCHOOL ATTENDANCE (circle one) 1. All Day 2. Full-Time 3. Part-Time 4. Not Attending school	11 TYPE OF SCHOOL (circle one) 1. Public Middle School 2. Public High School 3. Trade/Tech./Voc. 4. Jr./Community College 5. Four-Year University 6. Not Applicable	12 Current Grade Now	13 PRESENT EMPLOYMENT STATUS (CIRCLE ONE) 1. Employed A. Full-Time B. Part-Time C. Underemployed D. In need of services to be Self-Sufficient 2. Employed but received termination of employment or military separation 3. Not Employed, was employment sought within the last 28 days? [No] [Yes] LAST DAY WORKED _____
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14 STREET ADDRESS (Residence)	ZIP CODE	15 U.S. CITIZENSHIP (circle one) 1. Citizen 2. Eligible Non-Citizen 3. Non-Eligible Non-citizen	16 CULTURAL IDENTIFICATION (circle one) 1. American Indian 2. Alaskan Native 3. Native Hawaiian	17 TRIBAL MEMBERSHIP (circle one) 1. Yes-Tribal Affiliation: _____ Tribal Enrollment #: _____ 2. No 3. Not Known
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18 VETERAN PREFERENCE (circle one) 1. Less than or equal to 180 days 2. Eligible Veteran 3. Other Eligible Person 4. Not a Veteran	19 SELECTIVE SERVICE REGISTRATION (circle one) 1. Yes 2. No 3. Not Required to Register (Under 18 or Female)	20 PUBLIC ASSISTANCE (circle ALL that apply) 1. GA/BIA 2. TANF 3. SSI/SSA/SSDI 4. Food Stamps 5. Foster Child Payments 6. TWEP 7. Food Commodities 8. Veteran Benefits 9. None	21 APPLICANT HOODIE SIZE (circle one) 1. S 2. M 3. L 4. XL 5. 2XL 6. 3XL 7. 4XL	22 BARRIERS TO EMPLOYMENT (circle all that apply) 1. Basic Skills Deficient 2. Low Income 3. Unemployed 6+ Mo. 4. Offender/Criminal Justice 5. Single Head Of Household 6. Pregnant/Parenting Teen 7. Limited English Proficiency 8. Individual with Disability 9. Poor Work History 10. Below Grade Level 11. Homeless 12. Displaced Homemaker 13. School Drop-Out 14. Runaway 15. Youth Additional Asst. 16. Welfare Recipient 17. Learning Disability 18. Not Applicable
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23 Youth Activity (Last 6 Months or Over – Activities include Community Services, Volunteer Services, Hobbies, Academic Accomplishments, Personal Accomplishments, Community Outreach, etc.): _____

24 **DO YOU HAVE IMMEDIATE FAMILY MEMBERS EMPLOYED WITH THE COMANCHE NATION? IF SO, PLEASE INDICATE: No Family Members Employed: _____**

NAME: _____ RELATIONSHIP : Mother Father Sister Brother Son Daughter Spouse

NAME: _____ RELATIONSHIP : Mother Father Sister Brother Son Daughter Spouse

ELIGIBLE FUNDING (circle all that apply) 1. CNG 2. WIOA Adult 3. WIOA Youth 4. NEW/ 5. INELIGIBLE	APPLICANT SIGNATURE: _____ DATE: _____	CERTIFICATION OF PROGRAM ELIGIBILITY: (circle all that apply) 1. WE 2. CRT 3. YEP 4. OUT 5. SS 6. EE 7. INELIGIBLE
PARENT/GUARDIAN SIGNATURE (if applicant is under 18 years): _____ DATE: _____	CERTIFIER SIGNATURE: _____ DATE: _____	REVIEWER SIGNATURE: _____ DATE: _____

Comanche Nation Workforce

YEP Application

Drug-Free & Alcohol-Free Policy

In order to ensure a safe, healthy, and productive drug-free/alcohol-free work environment for the youth of the Comanche Nation, to protect property and assets, maintain a favorable public image, and to ensure efficient operations, the Comanche Nation **prohibits** the use of drugs/alcohol/smokeless tobacco/other drug paraphernalia.

Entry upon the premises of any Comanche Nation Tribal Entity or any other worksite assigned, being at work with drug paraphernalia or under the influence of alcohol, drugs/controlled substances, or any combination thereof, are **grounds for immediate dismissal**. Any YEP participant caught using or accepting any type of tobacco products, alcohol, or drugs will be **immediately terminated, NO EXCEPTIONS**.

PRESCRIBED DRUGS:

“The following are the prescribed legal drugs (drugs for which I have a prescription) which I routinely take, have taken, or ingested within the past thirty (30) days.”

Please list drugs/medication with dosages, frequency, and date last taken or ingested. If you do not have prescribed or legal drugs which you are required to take, simply put a check mark by “None Prescribed”. *Documentation from Hospital/Doctor required for prescribed medication, if needed or request by the Workforce Department.*

Prescribed (Please list): _____ None Prescribed: _____
Food Allergies or Dietary Restrictions: _____

All youth participants are required to sign this statement declaring that **they are drug-free** and have read and agree to this policy. A COPY OF THIS POLICY WILL BE GIVEN TO EACH PARTICIPANT.

“With my signature, I agree to adhere to the above policy of the Comanche Nation Workforce regarding drugs and alcohol. I understand that by signing this document, I will also submit to a drug test, prior to or at the YEP Orientation, before my entry into any worksite. I also understand that refusal, missed scheduling of drug test, or any violation of this policy is grounds for immediate dismissal and/or termination from the Youth Employment Program. A penalty period of one (1) year will be given before I may reapply which will be imposed upon violation of this agreement.”

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Comanche Nation Workforce

YEP Application

Selective Service System

Must complete if Male AND 18 years of age or over

Individuals participating in any program established under this Act are required to provide evidence that they have registered with the Selective Service Pursuant to Section 453 (a) of the Military Selective Service Act. This is applicable **only to male applicants born after December 31, 1959, who are between the ages of 18 and 26.** Therefore, all male applicants who are within the eligible age group must register with the Selective Service.

Below check one that pertains to you:

- I certify that I am not required to be registered with the Selective Service because:
- I am female
 - I am currently in the armed services on active duty.
NOTE: Members of the Reserve and National Guard are not considered on active duty.
 - I have not reached my 18th birthday.
 - I was born before 1960.
 - I am a permanent resident of the Trust Territory of Northern Marianna Islands.
- I certify that I am registered with the Selective Service System.
- Service Number: _____

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

***Individuals needing registration can be done with the Intake Specialist.**

****Please attach a copy of online registration letter or a copy of Selective Service Card.**



Revised & Updated: 10/4/2022

Comanche Nation Workforce

YEP Application

Emergency Contact

Participant Name: _____ Phone #: _____

Primary Emergency Contact: _____ Relationship: _____

Address: _____ Phone #: _____

City: _____ State: _____ Zip Code: _____

Parent's Phone Numbers: Home: _____

Cell: _____

Work: _____

Secondary Emergency Contact: _____ Relationship: _____

Address: _____ Phone #: _____

City: _____ State: _____ Zip Code: _____

Primary Emergency Signature: _____ Date: _____

Secondary Emergency Signature: _____ Date: _____

Parent/Guardian Signature (Accept): _____ Date: _____





AUTHORIZATION TO RELEASE INFORMATION

I, _____, **authorize** the release of my personal and/or business-related information for employment verification purposes and/or program assistance to the named department/program listed below:

Name: _____ Comanche Nation Workforce _____
Address: _____ P.O. Box 908 _____
City: _____ Lawton _____ State: _____ OK _____ Zip Code: _____ 73502 _____
Fax: _____ 580-492-3770 _____

This request and authorization also apply to and/or release of: (check all that apply)

- Tribal Related Records
- Employment Records
- Copies of Personal Information
- Educational Records
- Financial Records
- Public Assistance Information
- Other: (Please list any other items not specified above) _____

I, _____, **do not authorize** the release of my personal and/or business-related information to any department, program, organization, and/or business of any kind.

Applicant Signature: _____ Date Signed: _____



Revised & Updated: 2/10/2022

Career Interest Inventory

Learning about yourself is the most important step in your search for a job or career. A Career Interest Inventory helps you relate your interests and abilities to career choices.

Step 1: Mark the items within each category that describe you. **Step 2:** Total the number of items checked for each category.

Realistic			Total -- R		
Are You:		Can You:		Like To:	
<input type="checkbox"/>	Handy	<input type="checkbox"/>	Fix things	<input type="checkbox"/>	Build things
<input type="checkbox"/>	Active, enjoy sports	<input type="checkbox"/>	Read a drawing	<input type="checkbox"/>	Work outdoors
<input type="checkbox"/>	Good with Animals	<input type="checkbox"/>	Play a sport	<input type="checkbox"/>	Work with Tools
<input type="checkbox"/>	Good with Tools	<input type="checkbox"/>	Put up a Tent	<input type="checkbox"/>	Use your hands

Investigative			Total -- I		
Are You:		Can You:		Like To:	
<input type="checkbox"/>	Interested in Learning	<input type="checkbox"/>	Use facts to answer questions	<input type="checkbox"/>	Find things
<input type="checkbox"/>	One who asks questions	<input type="checkbox"/>	Think	<input type="checkbox"/>	Use computers
<input type="checkbox"/>	Alert	<input type="checkbox"/>	Solve math problems	<input type="checkbox"/>	Work alone
<input type="checkbox"/>	One who likes Science	<input type="checkbox"/>	Use a microscope	<input type="checkbox"/>	Read magazines about computers

Artistic			Total -- A		
Are You:		Can You:		Like To:	
<input type="checkbox"/>	Artistic	<input type="checkbox"/>	Sketch, draw, paint	<input type="checkbox"/>	Attend concerts, art exhibits
<input type="checkbox"/>	Able to Imagine new things	<input type="checkbox"/>	Play a musical instrument	<input type="checkbox"/>	Read
<input type="checkbox"/>	Able to Think of new ideas	<input type="checkbox"/>	Write stories, sing, act, dance	<input type="checkbox"/>	Work on crafts, make things
<input type="checkbox"/>	Yourself	<input type="checkbox"/>	Decorate your room	<input type="checkbox"/>	Take pictures

Social			Total -- S		
Are You:		Can You:		Like To:	
<input type="checkbox"/>	Friendly	<input type="checkbox"/>	Teach a Child	<input type="checkbox"/>	Work with other people
<input type="checkbox"/>	Helpful	<input type="checkbox"/>	Tell people what you need	<input type="checkbox"/>	Help people.
<input type="checkbox"/>	A people person	<input type="checkbox"/>	Cooperate with others	<input type="checkbox"/>	Play team sports
<input type="checkbox"/>	Kind	<input type="checkbox"/>	Plan an Activity	<input type="checkbox"/>	Participate in meetings

Enterprising			Total -- E		
Are You:		Can You:		Like To:	
<input type="checkbox"/>	Confident	<input type="checkbox"/>	Sell things	<input type="checkbox"/>	Make decisions
<input type="checkbox"/>	Able to be firm	<input type="checkbox"/>	Talk to people	<input type="checkbox"/>	Plan get-togethers with friends
<input type="checkbox"/>	Active	<input type="checkbox"/>	Organize Activities	<input type="checkbox"/>	Meet important people
<input type="checkbox"/>	Able to Argue	<input type="checkbox"/>	Start Projects	<input type="checkbox"/>	Win an Award

Conventional			Total -- C		
Are You:		Can You:		Like To:	
<input type="checkbox"/>	Neat and Clean	<input type="checkbox"/>	Follow school rules	<input type="checkbox"/>	Use computers
<input type="checkbox"/>	Accurate	<input type="checkbox"/>	Keep records	<input type="checkbox"/>	Work with numbers
<input type="checkbox"/>	Careful to be neat	<input type="checkbox"/>	Write letters	<input type="checkbox"/>	Be exact with words, numbers
<input type="checkbox"/>	Careful to do things right	<input type="checkbox"/>	Use a computer	<input type="checkbox"/>	Follow directions

WE'RE COMING TO SAY HI

Comanche Nation Summer Youth Orientation
Tuesday, June 6, 2023
8:00 a.m. to 10:00 a.m.
Comanche Tribal Complex | 584 Bingo Rd, Lawton

As a member of the Comanche Nation, you and your family are eligible for membership at **Tinker Federal Credit Union.**

Stop by to learn about our Click® Checking* and Classic Checking* accounts, and TFCU's MoneyPlus™** Visa check card.

**Click® Checking and Classic Checking accounts may be opened by members ages 13-15 with a parent or qualifying joint owner. Must have a valid ID present.*

***MoneyPlus™ cards may be issued to members 13 to 17 with a parent or qualifying joint owner. Must have a valid ID present.*



TFCU
Tinker Federal Credit Union