

# CARES Act On-the-Job Training Participant Application



**Instructions:** Must complete all sections as indicated

Must begin with Section 1 and if directed to continue follow the final instructions.

**You must complete a profile in MS Works at [www.mdes.ms.gov](http://www.mdes.ms.gov) - Follow these instructions:** Go to I Need A Job and select, Find Job Now, at the top right of the screen you have login options (new user or go straight to your account) you will login in with the user name and password you have created. After you have logged in go to your profile and either create it or update it, you will need to have a complete profile which includes academic and employment history.

## SECTION 1 - CARES Act OJT Participant Eligibility

**Participants must meet one of the following criteria to be eligible for CARES Act OJT:**

Furloughed - terminated, temporarily laid off, or has received a notice of termination or layoff from employment on or after March 14th.

Unemployed - not working and is eligible for or has exhausted unemployment, or not working but is not eligible for unemployment due to insufficient earnings.

Underemployed - working in a lower capacity than one in which they are qualified or for a limited number of hours.

Otherwise displaced - 2020 graduate from high school, community college, or university who had their job offers revoked or their job search adversely impacted due to a depressed job market, or a member of a family experiencing economic hardship as a result of COVID-19.

**Were you able to meet one of the above criteria?**

Yes - **Continue**

No - Stop, you do **NOT** meet the eligibility for this program do **NOT** proceed

<b>First Name</b>	<b>Last Name</b>	<b>Social Security Number</b>	<b>Date of Birth</b>
<b>Address</b>		<b>City</b>	
<b>State</b>	<b>Zip Code</b>	<b>Telephone Number</b>	<b>Other Phone Number</b>
			<b>E-mail Address</b>

## SECTION 2 - Required Documentation

**1. Eligible to Work in United States Verification - Provide a copy of at least one of the following, unless additional documentation is noted.**

Current Driver's License or State Issued ID (Must also obtain SSN Card or Birth Certificate)

Social Security Card

Birth Certificate

Citizenship Record

Passport

Immigrant/Resident Alien Card

**2. Social Security Number Verification - Provide a copy of at least one of the following**

Social Security Card

Tax Form

Pay Check Stub (with full SSN)

**3. Date of Birth Verification**

**Provide a copy of at least one of the following**

Birth Certificate

Current Driver's License or State Issued ID

**4. Workforce Area Resident Verification**

Current Driver's License or State Issued ID - Obtain a copy of at least one (OR)

Applicant Attestation (by signing the application)

**5. Selective Service Verification (if applicable) - provide a copy of at least one of the following**

Verification Letter visit [www.sss.gov](http://www.sss.gov)

Registration Card

**I certify that the information provided is true and accurate to the best of my knowledge and belief.**

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

**Name of Employer who referred you to this program:** \_\_\_\_\_

**Instructions:**

Email this form and the required documentation to [wioa@cmpdd.org](mailto:wioa@cmpdd.org)