

Career Training Institute

WIOA Adult and SDH

Pre-Application

347 North Last Chance Gulch, Helena, MT

Phone: 443-0800 / Fax: 442-2745

The Workforce Innovation and Opportunity Act (WIOA) and State Displace Homemaker (SDH) programs were enacted in order to establish a support system that will assist in the employment needs of individuals, allowing them to support themselves and their family. **WIOA and SDH are NOT entitlement programs and eligibility is based on several factors including federal family size and income guidelines. CTI serves Lewis and Clark, Jefferson, Broadwater, and Meagher Counties.**

Applicant Information (Please print clearly)

Date: _____

Name: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Message Phone: _____ Birth Date: _____

EMAIL: _____ Referred by: _____

General Information

Do you have a current Driver License: Yes or No

Are you currently employed? Yes or No Full-time / Part-time (Circle one)

Name of current or last employer? _____

Have you been laid off from your job? Yes or No If yes, provide date _____

Have you been a stay at home parent? Yes or No If yes, for how long? _____

Are you a Veteran? Yes or No

What type of work are you seeking? _____

Do you currently have the skills to do this type of work? Yes or No

Days/Hours available to work: _____

Type of job hours you are seeking: Full-time / Part-time / Flexible Schedule (Circle all that apply)

Are you receiving Temporary Assistance for Needy Families (TANF)? Yes or No

Are you receiving food stamps or SNAP Benefits? Yes or No

Are you receiving Medicare or Medicaid or No (Circle all that apply)

Are you receiving SSI or SSDI or No (Circle one)

How many adults in your family? _____ How many children under 18? _____

Are you served by Helena Housing Authority? Yes or No

Do you have a ___misdemeanor or a ___felony? Offense: _____ or _____ No

Do you have a mental, physical or learning disability? Yes or No Explain: _____

Do you have a current resume? Yes or No

Have you looked/applied for work in the past month? Yes or No

If yes, provide last three employers you have submitted an application to:

1: _____ 2: _____ 3: _____

Why do you feel you been unsuccessful in obtaining employment? _____

Do you have a high school diploma? Yes or No

Do you have your GED or equivalent? Yes or No

Do you have a college degree? Yes or No If yes, what field? _____

Do you have any certifications? Yes or No If yes, what field? _____

Work History: Please list your three most recent employers:

Employer _____ Job Title _____
Dates of Employment _____
Wage \$ _____ / hour Reason for leaving _____

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Dates of Employment _____
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Dates of Employment _____
Wage \$ _____ / hour Reason for leaving _____

Describe your current financial situation, and how you would like a CTI program to help?

Circle those you are most interested in:

*Computer/Office Classes

*Work Experience/Training

*A College Trade Certification

*College

*Resume Assistance

List your three top goals related to your school, training, work or career:

1. _____

2. _____

3. _____

Other info. we should know about you? _____

Applicant Signature: _____

Required Documentation:

Picture ID
Birth Certificate

Social Security Card
Registration for Selective Service (if male)

Most recent paystub