EMPLOYMENT INFORMATION HANDBOOK

INMATE TRANSITION BRANCH

Federal Bureau of Prisons
Inmate Transition Branch
Washington, DC 20534

2007 Edition

Attribution: Parts of this publication have been copied or adapted from several government publications.

Additional information about the Bureau of Prisons offender transition program, including the dates of future job fairs and a copy of the Mock Job Fair Handbook can be obtained from the ITB web page: http://www.unicor.gov/about/about_fpi_programs/inmate_transition/ or through e-mail to smccollum@bop.gov or telephone 202-305-3860, 8128, 3553.

The following additional publications are available from the Inmate Transition Branch:

- **Employment Resource Center Handbook**
- **Institution Volunteer Handbook**
- **Community Volunteer Handbook**
- **Mock Job Fair Handbook**

Please send all handbook requests to the following address:

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PURPOSE

The Inmate Transition Program Branch (ITB) serves to strengthen existing Federal Bureau of Prisons (BOP) programs and to establish new ones designed to enhance the post release transition of federal prisoners. This employment information handbook provides prisoners with contacts and other information that can help them to prepare for release. Free information has been gathered from a variety of sources including, the U.S. Department of Labor's Internet web site, and you may freely copy, share, and use these materials.

WHAT SHOULD I DO TO PREPARE FOR RELEASE?

You should start preparing for release as early in your sentence as possible. This should include an assessment of your career objectives, completion of all education and vocational training programs offered by the prison, resolution of any substance abuse issues that you may have, and development of a realistic post release plan.

Parents should participate in parenting programs offered by the prison and should make a sincere effort to reestablish and repair family ties. Many people who prepare for release are unrealistic about what they are going to do and lack a workable plan. One example is a person who has no business experience and plans to start a business instead of finding employment. To successfully open a business you must have a business plan and start-up capital, but only about half of all new businesses survive after four years. While your long term goal may be to start a business, a job may be a more realistic immediate post release objective.

It is also important to remember that companies are required to verify your citizenship before they can hire you. The Immigration and Naturalization Service requires employers to complete a Proof of Identity form (Form I-9--**Appendix G)** for new hires to prove they are eligible to work in the United States. Review Appendix F and check the list of acceptable documents to ensure you are able to meet this critical pre-employment requirement. After you leave prison is not the time to discover that you do not have a copy of your social security card and birth certificate.

Many employers require that you provide information about the training, skills, and experience that they are looking for. An employment folder that contains your personal information and documents is a good way to do this. The employment folder should include copies of your resume, social security card, birth certificate, high school diploma or General Educational Development certificate, vocational certificates or college diplomas, and a transcript from each school you have attended (include prison schools). Remember to bring extra copies for use during interviews, and to keep the originals with you in your folder.

If you do not have a resume, prepare one and also fill out the sample job application found in this handbook (**Appendix C**). When you are 60 days or so from release, you should mail resumes and cover letters to employers whose addresses you obtain from the telephone book yellow pages or other sources. You should request an application form in your letter. Plan to follow up with these same employers by telephone or in person and request an interview when

you are released. If you do not have access to the yellow pages, you may want to ask a friend, relative, or even your parole officer to send you 10 - 20 addresses from the yellow pages. Remember that employers are looking for people who know what they want to do, who have skills, and who want a career with their company. Keep in mind that a significant number of ex-offenders have been employed in construction, retail, accommodation, food service , transportation and warehousing jobs. Don't forget to consider employers who hire staff for hotels, colleges, hospitals, and apartment building owners/managers.

If you have access to the Internet, it is a good source for local and national employment information.

ARE THERE EMPLOYERS WHO HIRE EX-OFFENDERS?

Assume employers will hire you if you are a good match for their needs. One survey of more than 1200 employers report that only eight percent said they would not hire an ex-offender. Since 92 percent of employers will consider hiring you, feel free to look for work from any legitimate source. Limiting yourself to employers that you believe hire ex-offenders can also limit your wages and job prospects. You should try to find employers who are a good match for your skills, experience, and career goals.

Your job search should include **all potential employers**. According to Richard Bolles' popular employment book, "What Color Is Your Parachute," some of the best ways to find a job are:

1. Asking for job-leads from family members, friends, and people in the community has a 33 percent success rate.

2. Knocking on the door of any employer, factory, or office that interests you, whether they are known to have a vacancy or not, has a 47 percent success rate.

3. Using the phone book's yellow pages to identify subjects or fields of interest to you in the town or city where you will release, and then calling up the employers listed in that field to ask if they are hiring for the type of position you can do and do well, has a 69 percent success rate.

Remember, the two most critical factors to a successful job search are attitude and persistence. You are marketing a product, yourself, and you have to believe in the product (you) in order to land that job. Also, like any sales situation, you have to market the product (you) and make sure that you make plenty of contacts. Treat your employment search like a job and spend at least 8 hours a day at it. Employers will not usually come looking for you so you have to get out to meet them. Additional offender job search information on searching for jobs, explaining a conviction, and interview tips, can be found in **Appendix A**.

WHAT ABOUT FEDERAL PROGRAMS TO HELP EX-OFFENDERS?

Federal programs are generally designed to help people who need work, housing, public assistance, and other services. While each program has different standards for participation with low income being the most common requirement, there are no federal programs exclusively for ex-offenders.

Most assistance programs are administered locally by community agencies. You can find the addresses for them in the local telephone book's blue pages and on the Internet. One of the first stops you should make is to the state employment service office to help you with job leads. Their local addresses are located in the blue pages of the telephone book. You may want to ask the state employment service about job search assistance, federal bonding, employer tax incentives, job training, and Workforce Investment Act - sponsored training. If there are other local agencies or one-stop assistance centers, you may want to contact them as well.

If you are a non-federal offender in a state or local correctional institution, you should ask education services staff for information about community, state, and private programs to help ex-offenders. Assistance may also be available from local faith-based organizations.

Your local library may offer public access to the Internet and provide employment information specific to your community. If there is a One-Stop Career Center in your area, be sure to visit it for job leads, training, and other services that can help you and your family. Always explain your situation when you visit any assistance services agencies and, if they cannot be of assistance, do not forget to ask for a referral to another agency or private organization that may be able to help you.

Veterans should contact their local veterans affairs office for assistance. The VA has a wide range of programs that can be helpful, including rehabilitation services. The Internet website for the VA is www.va.gov, or you can contact their national toll free number at 800-827-1000. Local VA offices are also listed in the government pages of the telephone book. **Note:** Only veterans with honorable or general discharges are eligible to receive services.

WHAT ABOUT STATE AND FEDERAL JOBS FOR EX-OFFENDERS?

Ex-offenders have no special status when applying for state and federal jobs. The application and selection procedures for state jobs follows state guidelines, and federal jobs follow the rules and guidelines of the Office of Personnel Management (OPM).

State Jobs

To find out about state jobs, contact the Department of Human Resources in the state where you plan to release. You can also find out about state jobs on Internet at www.state.__.us. Fill in the blank with the two letter postal code for the state. For example, Virginia would be www.state.*va*.us. State jobs may also be posted at the local U.S. Employment Service office and each state's contact information can be found in the blue pages of the telephone book.
Note: Each state's web site is different, but you can find job information by entering "jobs" in

the "search" box for any given state website.

Federal Jobs

Th- Office of Personnel Management (OPM) announces most federal jobs on their website at www.usajobs.opm.gov. You can also call the OPM automated telephone system, an interactive voice response telephone system, at (478) 757-3000 or TDD (478) 744-2299. Job seekers can access current job vacancies, employment information fact sheets, applications, forms, and even apply for some jobs. Many federal agencies have job information telephone numbers located in the blue pages of the telephone book. Federal job postings are also available from the nearest U.S. Employment Service office.

WHAT ABOUT LOANS AND GRANTS?

There are many agencies in the federal government that provide loans, grants and assistance. The best source for these is the Catalog of Federal Domestic Assistance. It is available at some libraries and from the Government Printing Office (GPO). Information is also available from the Federal Citizen Information Center at 1-800-FED-INFO, or on the Internet: www.pueblo.gsa.gov.

There are no small business loans or grants specifically for ex-offenders. The Small Business Administration (SBA) does not provide direct loans. They do provide loan guarantees for certain businesses that borrow from lending institutions. They do not provide specific grants or low interest rate loans to ex-offenders for business start-up or expansion. For further information, you may want to contact the Small Business Administration, 409 Third Street, S.W., Washington, DC 20416; or on the Internet at: www.sba.gov.

WHAT PROGRAMS ARE SPONSORED BY THE U.S. DEPARTMENT OF LABOR?

The Department of Labor's website is www.dol.gov. The site contains an interactive map of the United States. Click on any state's icon and a variety services are displayed for the viewer.

One-Stop Employment and Training Services

One-Stop Careers Centers are at the heart of the workforce investment system under legislation called the Workforce Investment Act (WIA). Designed as part of America's Workforce Network, these centers provide an integrated array of high-quality services to help workers, job seekers, and businesses find assistance under one roof in easy-to-reach locations. One-Stop Career Centers help businesses find qualified workers, and help job-seekers and workers obtain employment and training services to advance their careers.

One-Stop Services also include assessment of skills, abilities, aptitudes, and needs; assistance with Unemployment Insurance; career counseling; job-search and job-placement assistance; and information on training, education, and related supportive services such as day care and

transportation. Eligible individuals also can obtain more intensive services and training.

One-Stop Career Centers are convenient to most communities in the United States and territories. While their names may differ (One-Stop Center, One-Stop Career Centers' Workforce Development Center, Employment Services, or Job Service), they are all committed to providing prompt, courteous, and customer-focused service. Each center represent a partnership involving federal, state, and local public and private service providers. They are overseen by community-based Workforce Investment Boards chaired by local businesspeople who determine the service priorities for their respective community.

You can learn the location of the One-Stop Career Center closest to where you live by accessing America's Workforce Network at www.dol.gov; or by calling the Toll-Free Help Line at 1-877-348-0502. (For TTY, call 1-877-348-0501.)

Job Search

If you are looking for employment, JOBLINE, www.jobline.net, is a free public service provided by state agencies with assistance from the National Federation of the Blind and the United States Department of Labor. JOBLINE's international website contains job listings, information on resume writing, how to prepare a cover letter, and interviewing tips. It offers assistance in English, Spanish, German, French and Portugese. The service is available on the telephone 24 hours a day, 7 days a week.

A touch-tone telephone is all that you need to establish your personalized job-search profile. The system asks you to use your telephone number for a profile number, or you may want to make up a profile number using your social security number and an extra digit. For example *SSN 111-22-3333* could be profile number *111-22**3**-3333* by adding an extra number such as the ***3*** in the example. The number that you entered will remain in effect for as long as you are seeking employment and using JOBLINE. The JOBLINE Toll-Free Number is 1-800-414-5748.

Physical and Mental Disability Employment and Training Services

Physical and mental disability employment and training services are available at One-Stop Career Centers and through other federal partners. The Disability Employment and Initiatives Unit of the Employment and Training Administration helps identify policies and to provide technical assistance to address barriers to work for people with disabilities. The President's Committee on Employment of People with Disabilities provides additional services, including a job recruitment program for people with disabilities, and a career exploration program for high school students with disabilities. A toll-free number for the Job Accommodations Network (800-526-7234) provides information on the employment provisions of the Americans with Disabilities Act.

National Internet Resource Link:

Family Village–A global community of disability related resources. Internet address: http://www.familyvillage.wisc.edu

Suicide Hot Lines:

http://suicidehotlines.com

1-800-SUICIDE or 1-800-784-2433
1-800-273-Talk or 1-800-273-8255
1-800-799-4TTY (4889)

Adult Training Programs

The Department of Labor's Employment and Training Administration (ETA) funds adult training programs that teach job skills and provide job placement services for adults who are at least 18 years of age. The programs are administered locally by One Stop Career Centers. The types of training offered by a local training center can vary depending on the job opportunities in the community. To help locate training programs in your area, search for a One Stop Center in your state, visit America's Service Locator, or call ETA's Toll-Free Help Line at 1-877-872-5627, (TTY: 1-877-889-5267).

Native American Employment and Training Program

The Workforce Investment Act contains provisions aimed at supporting employment and training activities for Indian, Alaska Native, and Native Hawaiian individuals. The Department of Labor's Division of Indian and Native American Programs (DINAP) funds grant programs that provide training opportunities at the local level for this target population. To find the program nearest you, look for a grant program in your state, contact your local One-Stop Center, or call ETA's toll-free help line at 1-877-872-5627, (TTY: 1-877-889-5267)

Senior Workers Employment Program

The Senior Community Service Employment Program (SCSEP) is a part-time employment program for low-income persons age 55 or over. Program participants work at community and government agencies and are paid the federal or state minimum wage, whichever is higher. They may also receive training, and can use their participation as a bridge to other employment positions which are not supported with federal funds. The program is administered by the Department of Labor's Employment and Training Administration (ETA).

Apprenticeship

Apprenticeship is a combination of on-the-job training and related instruction in which workers

learn the practical and theoretical aspects of a highly skilled occupation. Apprenticeship programs can be sponsored by individual employers, joint employer and labor groups, and/or employer associations. The Department of Labor's role is to safeguard the welfare of apprentices, ensure equality of access to apprenticeship programs, and provide integrated employment and training information to sponsors and the local employment and training community. Information about apprenticeship programs can be obtained from One-Stop Career Centers listed in the blue pages of your telephone book, from union locals listed in the white pages of the telephone book, or from the following Internet site: www.doleta.gov/atels_bat.

Employer Tax Credit Programs

The Work Opportunity Tax Credit (WOTC), authorized by the Small Business Job Protection Act of 1996 (P.L.104-188), is a federal tax credit that encourages employers to hire targeted groups of job seekers by reducing employers' federal income tax liability by as much as $2,400 per qualified new worker; $750 if working 120 hours, or $1,200 if working 400 hours or more per qualified summer youth.

Update: On October 4, 2004, the President signed into law the **Working Families Tax-Relief Act of 2004 (P. L. 108-311)**. This legislation extends the WOTC program and the **Welfare to Work** tax credits "without change" for a two-year period through December 31, 2005. The reauthorization is retroactive to December 31, 2003, and applies to new hires that began work for an employer on or after December 31, 2003 and before January 1, 2006.

The new employee must belong to a target group. The target group is defined in the law and the One Stop Career Center can assist you in determining your eligibility.

All new adult employees must work a minimum of 120 (or up to a maximum of 400) hours; summer youth must work at least 90 days between May 1 and September 15 before the employer is eligible to claim the tax credit. The tax credit for new hires employed 400 or more hours (or 180 days), is 35 percent of qualified wages for the first year of employment and 50 percent for the second year. Qualified wages are capped at $10,000 per year. Wages include tax-exempt amounts received under accident or health plans as well as educational assistance and dependent assistance programs.

To receive certification that a new employee qualifies for this tax credit, the employer must:

-Complete the one page IRS Form 8850 (**Appendix D**) by the day the job offer is made;

-Complete the one page ETA Form 9061 or Form 9062 (**Appendix E**):

- if the new employee has already been conditionally certified as belonging to a WOTC target group, complete the bottom of ETA Form 9062 (and sign and date it) that he or she has been given by a State Employment Security Agency or participating agency.
- if the new employee has not been conditionally certified, the employer and/or the new

employee must fill out and complete, sign and date ETA Form 9061.

-Mail the signed IRS and ETA forms to the employer's State Employment Security Agency. The IRS form must be mailed within 21 days of the employee's employment start date.

Welfare-to-Work

The Welfare-to-Work Tax Credit (WtW) is a federal income tax credit that encourages employers to hire long-term welfare recipients. Established by the Taxpayer Relief Act of 1997, this tax credit can reduce employers' federal tax liability by as much as $8,500 per new hire.

You can get IRS Form 8850, the Work Opportunity and Welfare-to-Work Tax Credits Pre-Screening Notice and Certification Request, and instructions, by downloading from www.irs.ustreas.gov, or by calling 1-800-829-1040.

For more information call or visit your local public State Employment Security Agency whose address is located in the blue pages of the local telephone book. Information on how and where to find any of these services can be obtained by calling America's Workforce Network Toll-Free Help Line at 1-877-872-5627; or through the Internet at America's Service Locator at www.servicelocator.org.

FEDERAL BONDING PROGRAM

The federal bonding program is designed to help a job applicant get and keep a job. The program issues Fidelity Bonds and is sponsored by the U.S. Department of Labor. A fidelity bond is a business insurance policy that protects the employer in case of any loss of money or property due to employee dishonesty. To be eligible for the bond, the employer must schedule a date to start work. The Employment Service local office then requests The McLaughlin Company in Washington, DC, to issue to the employer a Fidelity Bond insurance policy covering the worker.

For further information call or write to Ron Rubbin, Federal Bonding Program, 1725 DeSales Street, NW, Suite 700, Washington, DC 20036. Telephone: 1-877-872-5627, or contact your state bonding coordinator. See **Appendix K** for a list of **State Bonding Coordinators**.)

UNICOR BONDING PROGRAM

A new program, initiated in February, 2006 provides a $5,000 fidelity bond for employed ex-federal prisoners who worked in Federal Prison Industries (UNICOR) for at least six months during incarceration. For additional information, contact the UNICOR bonding specialist at

202-305-3553 or write to rxking@bop.gov.

OTHER PROGRAMS NOT DIRECTLY RELATED TO EMPLOYMENT

Credit Reporting

You can request a free credit file disclosure, commonly called a credit report, once every 12 months from each of the nationwide consumer credit reporting companies: Equifax, Experian and TransUnion. Internet: www.annualcreditreport.com.

A credit file disclosure provides you with all of the information in your credit file maintained by a consumer reporting company. It is information that could be provided by the consumer reporting company in a consumer report about you to a third party, such as a lender.

A credit file disclosure also includes a record of everyone who has received a consumer report about you from the consumer reporting company within a certain period of time–known as "an "inquiry." The credit file disclosure includes certain information that is not included in a consumer report about you to a third party, such as the inquiries of companies for pre-approved offers of credit or insurance and account reviews, and any medical account information which is suppressed for third party users of consumer reports. You are entitled to receive a disclosure copy of your credit file from a consumer reporting company under federal law and the laws of various states.

You can request a free annual credit report by phone or mail and it will be mailed within 15 days, or call 1-877-322-8228 to request your credit reports by phone. You will go through a simple verification process over the phone and your report will be mailed to you. There is also a free request form that you can download from the website. You can request your credit report by mail by filling out the request form and mailing it to Annual Credit Report Request Service P.O. Box 105281 Atlanta, GA 30348-5281.

Food Stamp Program

The Food Stamp Program provides benefits to low-income people to buy food to improve their diets. Food stamp recipients spend their benefits (in the form of paper coupons or electronic benefits on debit cards) to buy eligible food in authorized retail food stores.

The Food Stamp Program serves as the first line of defense against hunger. It enables low-income families to buy nutritious food with coupons and Electronic Benefits Transfer (EBT) cards. EBT is an electronic system that allows a recipient to authorize transfer of their government benefits from a federal account to a retailer account to pay for products received. Visit the USDA's pre-screening tool at www.foodstamps-step1.usda.gov.

-Food Stamp Eligibility Criteria

In order to qualify for this benefit program, you must fall into one of two groups: (1) those with a current bank balance (savings and checking combined) under $2,001 who are responsible for a

person or persons age 60 and under; or (2) those with a current bank balance (savings and checking combined) under $3,001 who are responsible for a person 61 and over.

•Food Stamp Program and how to apply. Visit: www.fns.usda.gov/fsp.

•Food Stamp Program. Toll-free information number: 1-800-221-5689.

Public Housing

Housing information can be obtained from the local departments of housing. They are listed in the blue pages of the telephone book at your release destination. For those who do not have access to local information, contact the U.S. Department of Housing and Urban Development (HUD), 451 7th Street, S.W., Washington, DC 20410. Telephone: (202) 708-1112, TTY: (202) 708-1455. Ex-offenders with drug and sex offender convictions and are ineligible for public housing in most localities. For information about eligibility restrictions call the toll-free 1-866-784-0492. Internet: www.hud.gov/renting/phprog.cfm.

State Governments' Interactive Chart of Re-Entry Housing Options

With funding support from the Bureau of Justice Assistance, the Council of State Governments (CSG) has developed a web-based tool to help users learn more about different re-entry housing options available for people released from prison or jail. The chart compares housing types on several dimensions including potential funding sources, level of availability in the community, typical length of stay, and potential barriers to accessing a particular option. It also offers descriptions of programs that have successfully housed individuals returning to the community from prison or jail, and provides links to the programs' websites when available.

To view this interactive chart, visit: www.tools.reentrypolicy.org/housing

<www.ent.groundspring.org/EmailNow/pub.php?module=URLTracker&cmd=trac

Homelessness Programs

The Department of Health and Human Services offers many programs, grants, and services. These help persons who have become homeless. For more information, contact the U.S. Department of Housing and Urban Development, 4517th Street S.W., Washington, DC 20410. Telephone: (202) 708-1112, TTY: (202) 708-1455, or contact the local department of health and human services in the blue pages of your telephone book

Additional information can be obtained from The Emergency Food and Shelter (EFSP) National Board Program at 701 North Fairfax Street, Suite 310, Alexandria, VA 22314-2064; or, telephone 703-706-9660, Fax: 703-706-9677.

Social Security Administration (SSA)

The SSA is responsible for administering retirement, survivors and disability benefits, and the Supplemental Security Income (SSI) program. For more information, check the blue pages of the

telephone book or write to: Social Security Administration, 6401 Security Boulevard, Baltimore, Maryland, 21235. The national toll free number is 1-800-772-1213; (TTY) 1-800-325-0778). Internet: www.ssa.gov.

-Social Security Disability Insurance

Social Security **disability** benefits can be paid only to people who have recently worked and paid Social Security taxes, and who are unable to work because of a serious medical condition that is expected to last at least a year or result in death. An individual who is a recent parolee or is unemployed does not qualify for disability benefits. No benefits are payable for months in which you are confined to a jail, prison, or other correctional facility. Social Security retirement benefits can only be paid to people who are 62 or older. Generally, you must have worked and paid taxes into Social Security for 10 years to be eligible, but your spouse or children, if they are eligible, can be paid benefits on your record, or you may receive benefits on the record of a spouse or former spouse.

-Supplemental Security Income (SSI)

SSI benefits can be paid to people who are 65 or older, blind or disabled, and who have low income and few resources. No SSI benefits are payable for any month that you are in a jail, prison, or certain other public institutions.

-Ticket to Work Program

The Ticket to Work and Work Incentive Improvement Act of 1999 provides an opportunity for people who receive social security disability benefits to work. It provides training and employment opportunities for disabled individuals while allowing them to continue to receive social security benefits. Contact Maximus, Inc., at their toll free numbers (866) 968-7842, or (866) 833-2967 (TTY). Internet: www.yourtickettowork.com.

-Social Security Work History

To ensure accurate work information for your resume or sample application, you may want to request a statement of work history from the Social Security Administration. The SSA form and instructions are in **Appendix E**.

Domestic Violence Issues

The National Domestic Violence Hotline (NDVH) serves as the only center in the nation that is available for victims, friends and family who often call for life saving help.

The hotline operates 24 hours a day in more than 140 languages: For assistance call: 1-800-799-7223 or 1-800-787-3224 (TTY). Internet: www.ndvh.org.

Medical Assistance

For information on medical assistance contact the health department at the location where you are released. You can find their number in the blue pages of the local telephone book. You may also write to The Department of Health and Human Services 200 Independence Ave, SW., Washington, DC 20201. Telephone: 1-877-696-6775 or 202-619-0257. Internet: www.hhs.gov. To find information about medicare call: 1-800-633-4227.

Children and Families of Adult Offenders

A directory of available programs can be downloaded at no charge at www.nicic.org, or call Family and Corrections Network at 434-589-3036.

Child Support Enforcement

The Child Support Enforcement (CSE) Program is a federal, state, and local effort to locate parents, their employers, and/or their assets; to establish paternity if necessary; and to establish and enforce child support orders. State and local CSE offices provide day to day operation of the program. The federal role is to provide funding, issue policies, ensure that federal requirements are met, and interact with other federal agencies that help support the CSE program.

In most states, CSE offices are listed under the human services agency in the local government section of the telephone directory. If there is not a separate listing, the human services agency information operator should be able to give you the number. Call your CSE office to learn how to apply for enforcement services and what documents (birth certificates, financial statements, etc.) you need to provide. They will answer your questions, or refer you to the state office that can. **Note: Be sure to indicate your release destination.**

State Child Support Enforcement agencies are listed on the next page, including telephone numbers for local offices.

STATE CHILD SUPPORT ENFORCEMENT OFFICES

Alabama	(334) 242-9300	Montana	(800) 346-5437

Alaska	(800)	478-3300	Nebraska	(402)	471-1400
Arizona	(602)	252-4045	Nevada	(775)	684-0705
Arkansas	(501)	682-6169	New Hampshire	(800)	852-3345
California	(866)	249-0773	New Jersey	(609)	588-2915
Colorado	(303)	866-4300	New Mexico	(505)	476-7207
Connecticut	(860)	424-4989	New York	(518)	474-9081
Delaware	(302)	326-6200	North Carolina	(919)	255-3800
DC	(202)	724-2131	North Dakota	(701)	328-3582
Florida	(850)	922-9590	Ohio	(614)	752-6561
Georgia	(800)	227-7993	Oklahoma	(405)	522-5871
Guam	(671)	475-3324	Oregon	(503)	986-6166
Hawaii	(808)	692-7000	Pennsylvania	(800)	932-0211
Idaho	(800)	356-9868	Puerto Rico	(787)	767-1500
Illinois	(800)	447-4278	Rhode Island	(401)	222-4368
Indiana	(317)	233-5437	South Carolina	(803)	898-9210
Iowa	(515)	281-5647	South Dakota	(605)	773-3641
Kansas	(785)	296-3237	Tennessee	(615)	313-4880
Kentucky	(502)	564-2285	Texas	(800)	252-8014
Louisiana	(225)	342-4780	Utah	(801)	536-8500
Maine	(800)	371-3101	Vermont	(802)	786-3214
Maryland	(800)	332-6347	Virgin Islands	(340)	777-3070
Massachusetts	(617)	626-4064	Virginia	(800)	257-9986
Michigan	(517)	373-7570	Washington	(360)	664-5000
Minnesota	(651)	215-1714	West Virginia	(800)	249-3778
Mississippi	(800)	434-5437	Wisconsin	(608)	266-9909
Missouri	(800)	859-7999	Wyoming	(307)	777-7631
American Samoa	(684)	633-4163			

Source: www.ocse.acf.hhs.gov/int/directories/index

Updated: January 2007

AIDS Treatment Data Network

The AIDS Treatment Data Network is an independent, community-based, not-for-profit, organization that provides treatment access and advocacy, case management, supportive counseling, and English and Spanish language information services to men, women, and children with AIDS , HIV and those co-infected with hepatitis. The nationwide toll-free number is: 212-260-8868 and 1-800-734-7104 in New York State. Internet: www.atdn.org.

-The National CDC STD/HIV Hotline (Treatment Only Offered in State of New York)

The National CDC STD/HIV Hotline provides anonymous, confidential information on sexually transmitted diseases (STDs) and how to prevent them. It also provides referrals to clinical and other services. The nationwide toll-free number in English is 800-227-8922, in Spanish it is 800-344-7432, and TTY is 800-243-7889**.**

Internet: www.cdc.gov/std/default.htm and www.cdc.gov/hiv/

Mental Health and Chemical Dependency Resources

Staff at the national/regional agencies listed below should be able to direct callers to mental health and chemical dependency resources in specified communities.

National Mental Health Association
2001 N. Beauregard St. 12th Floor
Alexandria, VA 22311
(703) 684-7722 voice
(703) 684-5968 fax
(800) 969-6642 info line
www.nmha.org

Department of Health and Human Services
National Health Information Center
Referral Specialist
P.O. Box 1133
Washington, D.C. 20013-1133
www.hhs.gov/

National Alliance for the Mentally Ill
Colonial Place Three
2107 Wilson Blvd., Suite 300
Arlington, VA 22201-3043
(703) 524-7600 voice
(800) 950-6264
www.nami.org

Substance Abuse and Mental Health Services Administration
1 Choke Cherry Road
Room 8-1036
Rockville, MD 20857
www.samhsa.gov

SAMSHAS Workplace Program Helpline
1-800-662-HELP

The National Clearinghouse for Alcohol and Drug Information
POB 2345
Rockville, MD 20847-2345
Call Toll Free: 1-800-729-6686
Hablamos Español: 1-877-767-8432
Local Callers: (301)468-2600
Fax: (301) 468-6433
www.healthfinder.gov/orgs/HR0027.htm

National Mental Health Information Center
P.O. Box 42557
Washington, DC 20015
1-800-789-2647
866-889-2647 (TDD)

American Council on Alcoholism
1000 E. Indian Road
Phoenix, AZ 85014
(800) 527-5344 Toll Free
www.aca-usa.org/

United Way of America
701 N. Fairfax Street
Alexandria, VA 22314-2045
(703) 836-7112
www.unitedway.org/

The Salvation Army
National Headquarters
615 Slaters Lane
P.O. Box 269
Alexandria, VA 22313
(703)-684-5500
www.salvationarmyusa.org/usn/

GovBenefits.gov
Government Benefits Internet Website provides a list of benefits you may be eligible to receive and information about how to apply for those programs.1-800-333-4636 www.govbenefits.gov/

HOW DO I GET MY BIRTH CERTIFICATE?

To obtain a copy of a birth certificate in the United States, write or go to the vital statistics office in the state or area where the event occurred. To ensure that you receive an quick and accurate record upon your request, follow these steps:

•Make your letters concise and to the point.

•Don't include more than 1 or 2 requests at a time and be careful not to write confusing details of your family history.

•Type or print all names and addresses in your letter.

•Provide complete information each individual and event for which you need documents.

•Include all names, nicknames, and alternate spellings that were used. List dates and types of event as completely and accurately as possible. If you don't know the exact date, specify the span of years you wish searched and be prepared to pay for searches that span several years. Always provide a self addressed stamped envelope. Internet: www.usbirthcertificate.net/google/.

Include the following information:

Date of request

Full name (last name in caps)

Sex

Date of birth

Place of birth (city or town, county,

State, and name of the hospital, if known)

Mother's maiden name

Father's name

Relationship to party

The purpose for which the record is needed

Requestor's name and address

Requestor's driver's license number and state (some counties require it)

Requestor's signature

Note: The addresses and telephone numbers of the state vital records contact offices are on the following page. You may call or write to them for vital documents. If you write, ask your counselor or case manager for assistance. You should also include a letter from your case manager or counselor indicating who you are or who you claim to be, and the purpose for requesting the record.

State Contacts for Vital Documents

Vital Records Fees for Services Are Subject to Change

www.cdc.gov/hch/howto/w2w.w2welcome

(As of 12/27/2006)

Alabama
Alabama Vital Records
P.O. Box 5625
Montgomery AL 36103-5625
334-206-5418
www.ph.state.al.us/chs/VitalRecords/birth/birth.html

Alaska
Department of Health and Social Services
Bureau of Vital Statistics
5441 Commercial Blvd.
Juneau AK 99801
907-465-3391
www.hss.state.ak.us/dph/bvs/birth/birth_form.pdf

American Samoa
America Samoa Government
Registrar of Vital Records
Pago Pago AS 96799
684-633-1406

Arizona
Office of Vital Records
Arizona Department of Health Services
P.O. Box 3887
Phoenix AZ 85030-3887
602-364-1300/888-816-5907
www.hs.state.az.us/vitalrcd/birth_index.htm

Arkansas
Vital Records
POB 8184
Little Rock AR 72203-8184
1-866-209-9482
www.healthyarkansas.com

California
Office of Vital Records
Department of Health Services
MS5103
P.O. Box 997410
Sacramento CA 95899-7410
916-445-2684
www.dhs.ca.gov/hisp/chs/ovr/birthordercert.htm

Canal Zone
Vital Records Section
Passport Services
1111 19th St NW Suite 510
Washington DC 20522-1705
202-955-0307

Colorado
Vital Records Section
CO Department of Public Health and Environment
4300 Cherry Creek Drive South
HSVRD-VR-A1
Denver CO 80246-1530
303-692-2200
www.cdphe.state.co.us/hs/certs.asp

Connecticut
Vital Records
Department of Public Health
410 Capitol Ave MS#11VRS
Hartford CT 06106
860-509-7700
www.dph.state.ct.us/pb/hisr/vital_records.htm

Delaware
Office of Vital Statistics
Division of Public Health
Office of Vital Statistics
417 Federal Street
Dover DE 19903
1-877-888-0248
www.state.de.us.gov/hss/dph/ss/vitalstats.html

District of Columbia
Vital Records Office
825 N Capitol St NE
Washington DC 20002
202-671-5500
www.dchealth.dc.gov

Florida
Department of Health
Office of Vital Statistics
P.O. Box 210
Jacksonville FL 32231-0042
1-877-550-73306900 (X-9000)
www.doh.state.fl.us

Georgia
Georgia Department of Human Resources
Vital Records

2600 Skyland Drive NE
Atlanta GA 30319-3640
404-679-4701
www.state.ga.us/programs/vitalrecords

Guam
Office of Vital Statistics
Department of Public Health and Social Services
Government of Guam
P.O. Box 2816
Agana, GU, M.I. 96910
671-734-4589

Hawaii
State Department of Health
Office of Health Status Monitoring
Vital Statistics Section
P.O. Box 3378
Honolulu HI 96801
808-586-4539/808-586-4542
www.hawaii.gov/health/vital-records

Idaho
Bureau of Health Policy and Vital Statistics
P.O. Box 83720
Boise ID 83720-0036
208-334-5988/1-800-926-2588
www.state.id.us/dhw

Illinois
Division of Vital Records
IL Department of Public Health
605 W Jefferson St
Springfield IL 62702-5097
217-782-6553
www.idph.state.il.us

Indiana
Vital Records Department
State Department of Health
610 Washington
Indianapolis IN 46204
317-233-2700
www.in.gov/isdh/form/vital_records_form.htm

Iowa
Iowa Department of Public Health
Bureau of Vital Records
Lucas Office Building-1st Floor
321 East 12th Street
Des Moines IA 50319-0075
515-281-4944
www.idph.state.ia.us

Kansas
Office of Vital Statistics
Curtis State Office Building
1000 SW Jackson Street
Suite 120
Topeka KS 66612-2221
785-296-1500
www.kdhe.state.ks.us/vital

Kentucky
Office of Vital Statistics
Department for Health Services
275 East Main Street
Frankfort KY 40621-0001
502-564-4212
www.publichealth.state.ky.us/vital.htm

Louisiana
Office of Public Health
Vital Records Registry
POB 60630
New Orleans LA 70160
504-568-5152
www.dhh.state.la.us

Maine
Office of Vital Records
Maine Department of Human Services
244 Water Street
11 State House Station
Augusta ME 04333-0011
207-287-3181
www.state.me.us

Maryland
Division of Vital Records
Department of Health and Mental Hygiene
6550 Reisterstown Road
P.O. Box 68760
Baltimore MD 21215-0020
410-764-3038
www.mdpublichealth.org/vsa

Massachusetts
Registry of Vital Records and Statistics
150 Mount Vernon Street/1st Floor
Dorchester MA 02125-3105
617-740-2600
www.state.ma.us/dph/bhsre/rvr/vrcopies.htm

Michigan
Vital Records Request
P.O. Box 30721
Lansing MI 48909
517-335-8656
www.michigan.gov/mdch

Minnesota
Minnesota Department of Health
Attention: Office of the State Registrar

P.O. Box 9441
Minneapolis MN 55440-9441
612-676-5120
www.health.state.mn.us

Mississippi
Vital Records
State Department of Health
P.O. Box 1700
Jackson MS 39215-1700
601-576-7981
www.msdh.state.ms.us

Missouri
Missouri Department of Health and Senior Services
Bureau of Vital Records
930 Wildwood
P.O. Box 570
Jefferson City MO 65102-0570
573-751-6387
www.dhss.state.mo.us/birthanddeathrecords.html

Montana
Office of Vital Statistics
MT Department of Public Health and Human Services
111 N Sanders - Room 209
P.O. Box 4210
Helena MT 59604
406-444-2685/1-800-877-1946
www.dphhs.state.mt.us

Nebraska
Vital Records
301 Centennial Mall South
P.O. Box 95065
Lincoln NE 68509-5065
402-471-2871
www.hhs.state.ne.us/ced/cedindex.htm

Nevada
Office of Vital Records and Statistics
Capitol Complex
505 East King Street
Room 0102
Carson City NV 89710-4749
775-684-4242
www.health2k.state.nv.us

New Hampshire
Bureau of Vital Records
Health and Welfare Building
29 Hazen Drive
Concord NH 03301-6508
603-271-4650
www.dhhs.state.nh.us

New Jersey
NJ Vital Statistics
Customer Service Unit
P.O. Box 370
Trenton NJ 08625-0370
609-292-4087
www.state.nj.us/health/vital/vital.htm

New Mexico
New Mexico Vital Records
P.O. Box 26110
Santa Fe NM 87502
509-841-4185
www.health.state.nm.us

New York (except New York City)
Certification Unit
Vital Records Section
POB 2602
2nd Floor
800 N Pearl St
Menands, NY 12204
518-474-3075
www.health.state.ny.us/vital_records

New York City
Office of Vital Records
NY City Department of Health and Mental Hygiene
125 Worth St/CN4
Room 133
New York, NY 10013-4090
212-788-4520
www.nyc.gov/health

North Carolina
NC Vital Records
1903 Mail Service Center
Raleigh NC 27699-1903
919-733-3526
www.schs.state.nc.us/SCHS

North Dakota
Division of Vital Records
600 East Boulevard Avenue
Dept. 301
Bismarck ND 58505-0200
701-328-2360
www.dhealth.gov/vital

Northern Mariana Islands
Commonwealth Recorder
Superior Court-Vital Records Section
POB 37
Saipan MP 96950

670-236-9830 (phone)
670-236-9831 (fax)

Ohio
Vital Statistics
Ohio Department of Health
246 N High Street
1st Floor
Columbus OH 43216
614-466-2585/877-767-6446
www.vitalrec.com/oh.html

Oklahoma
Vital Records Service
State Department of Health
1000 Northeast 10th Street
Oklahoma City OK 73117
405-271-4040
www.health.state.ok.us/

Oregon
Oregon Vital Records
P.O. Box 14050
Portland OR 97293-0050
503-731-4000
www.oregon.gov/DHS/ph/

Pennsylvania
Division of Vital Records
101 South Mercer Street
Room 401
P.O. Box 1528
New Castle PA 16101
724-656-3100/1-877-PA-HEALTH
www.dsf.health.state.pa.us

Puerto Rico
Department of Health
Demographic Registry
P.O. Box 11854
Fernandez Juncos Station
San Juan PR 00910
787-767-9120

Rhode Island
Office of Vital Records
Rhode Island Department of Health
3 Capitol Hill Room 101
Providence RI 02908-5097
401-222-2811/401-232-2812
www.health.state.ri.us

South Carolina
Office of Vital Records
SC DHEC
2600 Bull Street
Columbia SC 29201
803-898-3630
www.scdhec.net/vr

South Dakota
Vital Records
State Department of Health
600 East Capitol Avenue
Pierre SD 57501-2536
605-773-4961
www.state.sd.us/doh/vitalrec/vital.htm

Tennessee
Tennessee Vital Records
Central Services Building
421 5th Avenue, North
Nashville TN 37247
615-741-1763
www2.state.tn.us/health/vr/index.htm

Texas
Bureau of Vital Statistics
Texas Department of Health
P.O. Box 12040
Austin TX 78711-2040
512-458-7111/888-963-7111
www.dshs.state.tx.us/vs/

Utah
Office of Vital Records and Statistics
Utah Department of Health
288 North 1460 West
P.O. Box 141012
Salt Lake City UT 84114-1012
801-538-6105
www.health.utah.gov/vitalrecords

Vermont
Vermont Department of Health
Vital Records Section
P.O. Box 70
108 Cherry Street
Burlington VT 05402-0070
802-828-3286
www.healthyvermonters.info.

Virginia
Office of Vital Records
P.O. Box 1000
Richmond VA 23218-1000
804-662-6200
www.vdh.state.va.us

Virgin Islands
Department of Health
Vital Statistics
Charles Harwood Memorial Hospital
St. Croix VI 00820
340-774-9000/ext. 4685 or 4686

Washington
Department of Health
Center for Health Statistics
P.O. Box 9709
Olympia WA 98507-9709
360-236-4300
www.doh.wa.gov/ehsph/chs/cert.htm

West Virginia
Vital Registration Office
Room 165
350 Capitol Street
Charleston WV 25301-3701
304-558-2931
www.wvdhhr.org

Wisconsin
Wisconsin Vital Records Office
1 West Wilson Street
P.O. Box 309
Madison WI 53701-0309
608-266-1371
www.dhfs.state.wi.us/vitalrecords

Wyoming
Vital Records Services
Hathaway Building
Cheyenne WY 82002
307-777-7591
www.wdh.state.wy.us/vital_records

HOW DO I GET MY DRIVER'S LICENSE?

A driver's license is the best form of picture identification and can be a useful in your employment search. Contact the state department of motor vehicles where you will be released for information on how to reinstate or obtain a driver's license. Be sure to include your name, birth date, address, and social security number in your correspondence.

Note: A list of "State Contacts for Driver License Information" is provided on the next page.

State Contacts for Driver License Information

(as of 12/27/2006)

Find Updated DMV addresses at

www.onlinedmv.com/mailingaddresses.htm

Alabama Department of Public Safety
Driver's License Division
POB 1471
Montgomery, AL 36104
(334) 242-4400

Alaska Dept. of Motor Vehicles
2150 E. Dowling Road
Anchorage, AK 99507
(907) 269-5551

Arizona Department of Transportation
Motor Vehicles Division
P. O. Box 2100
Phoenix, AZ 85001-2100
(602) 255-0072 (Phoenix)
(800)-252-5866 (Tucson

Arkansas Office of Driver Services
7th & Wolfe Street
Ragland Building
Little Rock, AR 72203
(501) 682-7060

California Department of Motor Vehicles
POB 942890
Sacramento, CA 24290-0001
(800-777-0133

Colorado Department of Revenue
Motor Vehicle Division
1881 Pierce Street
Lakewood, CO 80214
(303) 205-5600

Connecticut Department of Motor Vehicles
60 State Street
Wethersfield, CT 06161
(860) 263-5700

Delaware Department of Motor Vehicles
Division of Motor Vehicles
P.O. Box 698
Dover, DE 19903
(302) 744-2500

District of Columbia
Bureau of Motor Vehicle Services
301 "C" Street, NW
Washington, DC 20001-2100
(202) 727-5000

Florida Department of Motor Vehicles
2900 Apalache Pkwy
Neil Kirkman Bldg
Tallahassee, FL 32399-0500
(850) 922-9000

Georgia Department of Driver Services
POB 80447
Conyers, GA 30016
(678) 413-8400 (Metro Atlanta Area)
(800) 866-754-3687

Hawaii Transportation Department
Driver License Section
POB 30340
Honolulu, HI 96820-0340
(808) 832-2904

Idaho Transportation Department
Driver Services
POBox 7129
Boise, ID 83707-1129
(208) 334-8735

Illinois Drivers Services
2701 S. Dirksen Pkwy
Springfield, IL 62723
(217) 782-6212

Indiana Bureau of Motor Vehicles
100 North Senate Avenue
Indianapolis, IN 46204
(317) 233-6000

Iowa Office of Driver Services
Park Fair Mall
100 Euclid Avenue
Des Moines, IA 50306-9204
(515) 244-9124 or
(515) 244-8725

Kansas Department of Motor Vehicles

Docking State Office Building
915 S.W. Harrison Street
POB 2188
Topeka, KS 66625-2128
(780-296-3963

Kentucky Division of Vehicle Licensing
200 Mero Street
Frankfort, KY 40652
(502) 564-6800

Louisiana Office of Motor Vehicles
P. O. Box 64886
Baton Rouge, LA 70896
(877) 368-5463

Maine Secretary of State
Bureau of Motor Vehicles
State House Station 29
Augusta, ME 04333-0029
(207) 624-9000 (Ext. 52114)

Maryland Motor Vehicle Administration
6601 Ritchie Highway NE
Glen Burnie, MD 21062
(410) 768-7274/301-729-4550

Massachusetts Registry of Motor Vehicles
P O Box 55889
Boston, MA 02205-5889
(617) 351-4500

Michigan Department of State
Driver and Vehicle Records
7064 Crowner Drive
Lansing, MI 48918
(888) 767-6424

Minnesota Department of Public Safety
Driver and Vehicle Services
445 Minnesota Street, Suite 180
St. Paul, MN 55101
(651) 296-6911

Mississippi Detachment of Public Safety
Driver Services Bureau
P. O. Box 958
Jackson, MS 39205
(601) 987-1200

Missouri Drivers License Bureau
301 West High Street/Room 470
Jefferson City, MO 65105-0200
(573) 751-4600

Montana Drivers Services Bureau
P. O. Box 201430
Helena, MT 59620-1430
(406) 444-3244

Nebraska Department of Motor Vehicles
301 Centennial Mall South
POB 94789
Lincoln, NE 68509-4789
(402) 471-3981

Nevada Department of Motor Vehicles
555 Wright Way
Carson City, NV 89711-0400
(877) 368-7828

New Hampshire Department of Safety
Division of Motor Vehicles
James H. Hayes Bldg
23 Hazen Drive
Concord, NH 03305
(603) 271-2371

New Jersey Motor Vehicle Commission
POB 009
Trenton, NJ 08666
609-292-6500

New Mexico Taxation & Revenue Dept.
Motor Vehicle Division
P. O. Box 1028
Santa Fe, NM 87504-1028
1-888-683-4636

New York State Dept. of Motor Vehicles
6 Empire State Plaza
Albany, NY 12228
Outside NY-518-473-5595
(800) 225-5368
(212-645-5550

North Carolina Division of Motor Vehicles
3148 Mail Service Center
Raleigh, NC 2769-3101

(919) 715-7000

North Dakota Division of Motor Vehicles
Driver's License and Traffic Safety
608 East Boulevard
Bismark, ND 58505-0700
(701) 328-2600

Ohio Bureau of Motor Vehicles
1970 West Broad Street
Columbus, Ohio 43223-1101
(614) 752-7600

Oklahoma Department of Public Safety
3600 North Martin Luther King Boulevard
Oklahoma City, OK 73111
(405) 425-2424

Oregon Driver & Motor Vehicle Services Branch
1905 Lana Avenue, NE
Salem, OR 97314
(503) 945-5000

Pennsylvania Department of Transportation
Driver and Vehicle Services
1101 South Front Street
Harrisburg, PA 17104
(717) 412-5300

Rhode Island Division of Motor Vehicles
100 Main Street
Pawtucket, RI 02860
(401) 588-3020

South Carolina Division of Motor Vehicles
P. O. Box 1498
Blythewood, SC 29016
(803) 896-5000

South Dakota Department of Public Safety Drivers Licensing
118 West Capitol Avenue
Pierre, SD 57501
(605) 773-6883

Tennessee Department of Safety
Driver License Issuance Division
1150 Foster Avenue
Nashville, Tennessee 37249

Texas Department of Public Safety
POB 4087
Austin, TX 78773-0001
(512) 424-2600 (English)
(512) 424-7181 (Spanish)

State of Vermont
Department of Motor Vehicles
120 State Street
Montpelier, Vermont 05603-0001
(802) 828-2000

Virginia Department of Motor Vehicles
P. O. Box 27412
Richmond, VA 23269
866-368-5463
800-435-5137

Washington Department of Licensing
P. O. Box 9030
Olympia, WA 98507-9030
(360) 902-3600

West Virginia Department of Transportation
Building 3, Room 113
1800 Kanawha Boulevard East
Charleston, WV 25317
1-800-642-9066
(304) 558-3900

Wisconsin Department of Transportation Bureau of Drivers Services
4802 Sheboygan Ave
P.O. Box 7918
Madison, WI 53707-7918
(608) 266-2353

Wyoming Department of Transportation
Driver Services Division
5300 Bishop Blvd
Cheyenne, WY 82009-13340
(307) 777-4800

Veterans Vocational Rehabilitation and Employment Service (VR&E)

Vocational Rehabilitation and Employment is the VA program that assists veterans with service-connected disabilities to achieve employment or to enhance their ability to function independently

at home and in the community.

Benefits include burial, pension, health, home loan, education, life insurance, and vocational rehabilitation. If you are a veteran and want to find out if you are eligible for benefits, contact the VA on their toll-free telephone number at 1-800-827-1000.

For a free pamphlet, *Federal Benefits for Veterans and Dependents*, contact the Veterans Administration, Office of Public Affairs (80D), 810 Vermont Ave, NW., Washington, DC 20420. To apply for Vocational Rehabilitation and Independent Living Services call the toll-free telephone number, 1-800-827-1000 to request VA Form 28-8832.

-Other VA Provided Services and Their Application Procedures:

The VA also provides available vocational and educational guidance and counseling to assist service-members, veterans, and certain dependents of veterans select appropriate career goals and training institutions that use VA educational benefits. Call the nationwide VA toll-free telephone number at 1-800-827-1000 to request VA Form 28-8832, Application for Vocational-Educational Counseling. Internet: www.vba.va.gov/pubs/educationforms.htm for an application for education benefits; or, www.gibill.va.gov/ to access the VA's education web site. If you would like additional information on any of the VA Education programs, please check the Internet: www.vba.va.gov/bln/vre/regional_offices.htm.

HOW CAN I GET MONEY TO CONTINUE MY EDUCATION?

Federal Student Financial Aid

Federal Student Financial Aid consists of Stafford Loans, PLUS Loans, Consolidation Loans, Federal Supplemental Educational Opportunity Grants (FSEOGs), Federal Work-Study, Federal Perkins Loans, and Pell Grants. A Federal Pell Grant, unlike a loan, does not have to be repaid. Generally, Pell Grants are awarded only to undergraduate students who have not earned a bachelor's or professional degree. (A professional degree is usually earned after earning a bachelor's degree in a field such as medicine, law, or dentistry.) For more information, contact:

Federal Student Aid Information Center
POB 84
Washington, DC 20044
1-800-433-3243

-Special Note for those with drug convictions:

A law enacted in July 1, 2001 suspends aid eligibility for students convicted under federal or state law of sale or possession of drugs. If you have been convicted for selling drugs, you will be ineligible for two years from the date of your conviction after the first offense, and indefinitely after

the second offense. Call 1-800- 433-3243 for more information, or go to www.fafsa.ed.gov, click on "Worksheets" in the left column, then select "Drug Worksheet." Even if you're ineligible for federal aid, you should complete the FAFSA because schools and states use the information in awarding nonfederal aid. You must complete Question 31 of the FAFSA; if you leave it blank, you'll automatically become ineligible for federal student aid.

Loss of Eligibility

If you lose eligibility, you can regain it early by successfully completing an approved drug rehabilitation program. However, a conviction prior to July 1, 2000 could still affect your eligibility if you were convicted for the first time for drug possession on February 1, 2000. You would then be ineligible for SFA program assistance from July 1, 2000 (the implementation date of the law) through January 31, 2001 (one year from the date of the conviction). Instructions on the FAFSA will help you to determine your eligibility under this law. **Remember, just because you were convicted does not automatically mean you still are ineligible for federal aid**.

If you are ineligible for federal aid, you should complete the FAFSA because you may be eligible for non-federal aid from states and private institutions. If you regain eligibility during the award year, notify the financial aid administrator at the school that you attend immediately. If you are convicted of a drug-related offense after you submit the FAFSA, you may lose eligibility for federal student aid and you may be liable to return any financial aid received during a period of ineligibility. When you apply for aid from the SFA programs, the U. S. Department of Education verifies some of your information with the following federal agencies: Social Security Administration, Selective Service System, Immigration and Naturalization Service, Department of Justice, and Department of Veterans Affairs.

Special Education Assistance

The National Association of Private Special Education Centers (NAPSEC) is a non-profit association whose mission is to represent private special education programs and affiliated state associations and to ensure access for individuals to appropriate private special education programs and services as vital components of the special education continuum.

You can contact them at: **NAPSEC**,1522 K Street, NW, Suite 1032,Washington, DC 20005. Phone: 202-408-3338; Fax: 202-408-3340; Email: napsec@aol.com. Internet: www.napsec.org

Ex-offenders Voting Rights by States

Convicted felons and ex-offenders typically lose their right to vote in state and federal elections. Almost all states have "disenfranchisement" laws. Only two states, Maine and Vermont, do not place restrictions on an ex-offender's right to vote. Listed below are the number states that place

some restrictions on the right to vote for people with felony convictions:

• 12 states have lifetime bans on voting for some or all people convicted of crimes;

• 5 states prohibit voting for life by those convicted of certain classes of crimes;

• 7 states have a lifetime bar that may be lifted only if the state grants a formal "restoration of civil rights;

• 18 states bar people from voting while they are incarcerated or serving parole or probation sentences;

• 6 states bar people from voting while they are incarcerated or on parole;

• 12 states deny voting rights to people only while they are incarcerated.

Check your local election board for information about voting rights for your state.

Expungement of Criminal Records

To expunge criminal records is to clear a person's record of a crime committed. A legal professional may assist you to determine how to expunge your record in your state. For more information, check the Internet: www.findcriminal-recordsonline.com.

Appendix A

JOB SEARCH INFORMATION

Adapted from the U.S. Department of Labor publication, "Tips for Finding the Right Job."

Job Tips for the Ex-offender

Dealing with potential employers is never an easy task for clients with criminal records. Ex-offenders who lie on a job application may get hired, but then fired if their record becomes known. Those who are honest may feel like they never even get a chance. Although there are no magic formulas for dealing with this sensitive situation, the following hints may be helpful. See your

release preparation coordinator for more information.

Make a "To Do List" every day and outline daily activities to look for a job.

-Apply for jobs early in the day. This will make a good impression and give you time to complete applications, have interviews, take tests, etc.

-Call employers to find out the best times to apply. Some companies take applications only on certain days and times during the week.

-Write down all employers you contact, the date of your contacts, people you talk to, and special notes about your contacts.

-Apply at several companies in the same area when possible. This saves time and money.

-Be prepared. Have a "master application" and resumes, pens, maps and job information with you all the time. Who knows when a "hot lead" will come your way.

-Follow up leads immediately. If you find out about a job late in the day, call right then! Don't wait until the next day.

Check Points

--Look for job openings with employers who need your job skills.

--Networking. Tell everyone you know you're looking for a job. Ask about openings where your friends work.

--State Employment Service Offices provide help to find jobs and other services, such as career counseling.

--Local public libraries have books on occupations and sometime post local job announcements.

–Community colleges and trade schools sometimes offer counseling and job information to students and the general public.

–Faith-based organizations sometimes offer employment services or provide job search help.

–Government sponsored training programs offer direct placement or short-term training and placement for qualified applicants. Check the yellow pages under Job Training Programs or Government Services.

–Journals and newsletters for professionals or trade associations often advertise job openings in their fields. Ask for these at the public library.

Resume

Be sure to prepare an appropriate resume. You should have enough copies of your resume so that you can leave one with each job interview. If you have several different skills (e.g. short order cook, and heating and air conditioning installer/repairman), you may want to prepare separate resumes. (**See Appendix B**)

A resume is a brief summary of your abilities, education, and skills. A resume has one purpose–to get you a job interview. To get someone to interview you, your resume must quickly show that you are worth an interview.

Gather and check all necessary information. Write down headings such as Education, Experience, Honors, Skills, Activities, and Position. Enter the following information beneath each heading:

■Education can include GED, training certificates, special seminars, summer school, or night school as well as college and university courses. List degrees and month/year obtained, names and locations of schools, and a brief summary of important courses you have taken.

■Experience is full-time paid jobs, academic research projects, internship or co-op positions, part-time jobs, or volunteer work. List the month/years you worked, position, name and location of employer, and your responsibilities at each place.

■Honors is a list of any academic awards (scholarships, fellowships, honors list), professional awards or recognition, or community awards.

■Skills is a list of computer languages and software, research, laboratory, teaching or tutoring, communication, leadership or athletic, among others.

■Activities is a list of academic, professional, or community organizations in which you hold office or are currently a member. List professional and community activities, including volunteer work. Listing extra-curricular activities or hobbies is optional.

■Position defines the kind of position you want for this job-search. Make notes. Now match your wishes up with positions that are actually available. You can get this information through job postings, ads, personal contacts, or your own research.

Check for accuracy. You will need full names, full addresses, correct and consistent dates, and correct spellings. Look over what you have written and try to select details of your education, experience, honors, skills, and activities that match an employer's needs in a few more important areas. Organize the resume effectively.

One final suggestion. You should include a separate cover letter when sending your resume to a prospective employer. The letter should indicate your interest in a particular company or position, summarize the most important parts of your education and experience, and let the employer know where and when you can be contacted for an interview.

Job Applications

If you are asked about felony convictions on an application, consider putting in "will discuss during interview." Since the purpose of an application is to get an interview for the job, putting "will discuss" instead of the possibly damaging information, you are encouraging the employer to either give you the interview to get more information, or eliminate you without really knowing why. If you are a qualified applicant, most employers will want to interview you. (**See Appendix C)**

Remember: When you fill out a job application in a company's employment office you should be groomed and dressed as if you were going on an interview. Sometimes you will be interviewed on the spot. When you file an application don't forget about it and hope the employer calls you. Follow-up–usually after 5-7 days. A phone call to check on the status of your application is recommended. In fact, the best advice any job seeker can get is "Don't give up!" There will probably be many "nos" before you get a job. However, if you're willing to work at getting a job, you will be successful. Good luck!

Possible Phone Scripts for Job Search Situations

FOR CLASSIFIED AD:

Hello, my name is _____. I'm calling about the (job title) position advertised in (name of newspaper & edition, i.e. Sunday's, yesterday's)_____.

I've had (number of years, or use "a lot" instead of a specific number of years)_____of experience n this field and would like to set up a time for us to get together and discuss this job in more detail.

FOR COLD CALL:

Hello, my name is_____. I'm calling to see if you have any openings for (job your interested in)_____. I've had (number of years, or use "a lot" instead of a specific number of years)_____ of experience in this field and would like to set up a time for us to get together and discuss this job in more detail.

IF THEY DON'T HAVE OPENINGS

Would it be possible for me to come down and fill out an application in case any positions become available? Do you know of any (job title)_____ openings in the area?

Remember:

- Be polite. Whether you get the results you want or not, thank the person for taking the time to speak with you.
- Be prepared to answer questions about your background and/or experience.
- Have a pen and paper handy to take down information or directions.
- Be prepared to set up an interview.

This script will give you an idea of how to talk to an employer on the phone. You should always use your own words and use language with which you are comfortable. **AVOID SLANG**.

EXPLAINING A FELONY CONVICTION TO AN EMPLOYER

For an ex-offender, the most dreaded part of he job search can be explaining a felony conviction to a potential employer. Many ex-offenders have never honestly answered the question, "Have you ever been convicted of a crime?" on an application. As a result, they drift in and out of employment, staying with a job until the employer finds out through a background check, a call from a parole agent, or some other way.

Ex-offenders may be fired for falsifying information on their job application, not because they are ex-offenders. A company may hire ex-offenders, but have a policy of terminating anyone for lying on the application.

It is up to you whether you tell an employer about felony convictions. But we believe that "*honesty is the best policy."* Our experience shows that *HOW* you communicate this information makes a difference. You must see yourself as a worthwhile and valuable asset who has the skills and abilities an employer needs, not as an ex-convict unworthy of employment. You need a positive self-image and confidence in your skills and abilities.

The federal Work Opportunity Tax Credit (WOTC) is available as an incentive to hire ex-offenders and others who may have difficulty in getting work. The Federal Bonding Program, in states where it is available, or the UNICOR Bond Program for federal ex-offenders, allows employers to hire ex-felons and bond them. These incentives, along with your positive attitude and qualifications, can make you an attractive job candidate.

Appendix B

SAMPLE RESUME

Example: Simple Chronological Resume

Your Name
Street Address
Your Town, IN 47000
Phone: (000) 000-0101
FAX: (000) 000-1100
E-mail: yourname@online.serv

Job Objective

This is a very brief statement on "the type of work" you are seeking. This is the first place an employer looks on any resume. It tells the employer your purpose in finding a job.

Highlights of Qualifications

List the main qualities that make you qualified for the job, including character traits, chief skills and strengths. Include significant commendations, awards, and honors you have received for previous jobs.

Relevant skills and experience

•List all dates of employment by the most recent job first

•Name(s) of employers and organizations

•Title(s) of the positions you held

•Brief description of your job responsibilities for each past position

Education

References

Provide past job references as requested

Chronological Resume

(Example)

Name

Address

Telephone Number(s) (Day); Evening

Job Objective:

Match with qualifications, employment, and education

Highlights of Qualifications:

- Number of years experience
- Quick learner
- Dependable, timely worker
- Easy personality and works well with others

Employment History

From (Month/Year) to Present (List all past employers in this format)

Name and Address of Employer:

Title:

- Prepare (use action words to describe duties)
- Demonstrate
- Manage
- Coordinate

Education

List School(s) and locations

Graduated? Diploma? Degree?

References

Available upon request of employer

Appendix C

SAMPLE JOB APPLICATION

Sample Job Application

The following sample job application will give you an idea of what to expect when you apply for a job. You may be asked to fill out an application on the day of the interview, so make sure you are prepared

to provide any necessary information about yourself and your employment history.

Retail Systems Corporation--Application for Employment

Personal Information

First Name: _____
Middle Name: _____
Last Name: _____
Social Security Number: _____

Street Address: _____
City: _____ State: _____ Zip: _____ County:_____

Home Phone: _____
Business Phone: _____

Have you ever applied for employment with us?
Yes: _____ No: _____ If yes, when?:_____

Position Desired

Title: _____
Desired Salary: $_____
If you prefer to work in a different zip code than where you currently live, please indicate where you would like to be located below.
City: _____ State: _____ Zip: _____

Work Eligibility

Are you eligible to work in the United States? Yes: _____ No: _____

Are you available to work holidays? Yes: _____ No: _____

When will you be available to begin work? _____/_____ (Month/Year)

Are you 17 or older? Yes: _____ No: _____

Have you been convicted of or pleaded no contest to a felony within the last five years?
Yes:_____ No:_____

If yes, please explain: _____
_____

Have you been convicted of, pleaded guilty to, or pleaded no contest to, an act of dishonesty, or breach of trust or moral turpitude, such as misdemeanor petty theft, burglary, fraud, writing bad checks, and other related crimes within the last five (5) years? * Yes: _____ No: _____
If yes, please explain: _____
_____

Do you have other special training or skills (additional spoken or written languages, computer software knowledge, machine operation experience, etc.)?
_____
_____

How did you hear of our organization?
_____
_____
_____

*Conviction of a crime, or pleading guilty to a criminal charge, will not necessarily disqualify you from the job for which you are applying. Each conviction or plea will be considered with respect to time, job relatedness, and other relevant factors.

Availability

Days Available
Sun. ____ Mon. ____ Tues. ____ Wed. ____ Th. ____ Fri. ____ Sat. ____
Total Hours Available: _____ Hours Available: from _____ to _____

Education

High School: _____ City:_____ State: _____
College: _____ City:_____ State: _____
Course of Study: _____ # of Years Completed:_____
Did You Graduate? Yes: _____ No: _____ Degree: _____

Employment History

Please give accurate and complete full-time employment record. Start with present or most recent employer. Include military experience if applicable.

Position #1
Company Name: _____ City:_____ State: _____
Company Phone Number: _____
Job Title: _____
Name of Supervisor: _____
Employed (Month and Year) From: _____ To: _____
Weekly Pay:_____
Describe your work: _____

_____

May we contact this employer? Yes: _____ No: _____

If not, why not? _____
Reason for leaving: _____

Position #2
Company Name: _____ City:_____ State: _____
Company Phone Number: _____
Job Title: _____
Name of Supervisor: _____
Employed (Month and Year) From: _____ To: _____
Weekly Pay:_____
Describe your work: _____
_____

May we contact this employer? Yes: _____ No: _____
If not, why not? _____
Reason for leaving: _____

Position #3
Company Name: _____ City:_____ State: _____
Company Phone Number: _____
Job Title: _____
Name of Supervisor: _____
Employed (Month and Year) From: _____ To: _____
Weekly Pay:_____
Describe your work: _____
_____

May we contact this employer? Yes: _____ No: _____
If not, why not? _____
Reason for leaving: _____

Agreement of the Transfer of Information

I declare the information provided by me in this application is true, correct, and complete to the

best of my knowledge. I understand that if employed, any falsification, misstatement, or omission of fact in connection with my application, whether on this document or not, may result in immediate termination of employment. I authorize you to verify any and all information provided above.

I acknowledge that employment may be conditional upon successful completion of a substance abuse screening test as part of the Company's pre-employment policy.

I acknowledge that if I become employed, I will be free to terminate my employment at any time for any reason, and that RSC retains the same rights. No RSC representative has the authority to make any contrary agreement.

I understand it is unlawful to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal and/or civil liabilities.

Signature: _____Date:_____

Printed Name: _____

Appendix D

IRS FORM 8850

Instructions for Form 8850

Department of the Treasury
Internal Revenue Service

(Rev. February 2007)

Pre-Screening Notice and Certification Request for the Work Opportunity Credit

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

What's New

The Tax Relief and Health Care Act of 2006 extended the work opportunity and welfare-to-work credits to cover individuals who begin work for the employer before January 1, 2008. In addition, for individuals who begin work for the employer after December 31, 2006, the Act provides that the welfare-to-work credit will be combined with the work opportunity credit. To carry out these changes, section 51 was amended, and section 51A was repealed.

The Form 8850 that you are required to file with the work opportunity tax credit (WOTC) coordinator for your state workforce agency (SWA) is now due no later than the 28th day after the job applicant begins work for you.

For employees who begin work after December 31, 2006, the following changes pertaining to targeted group members apply.

- Ex-felons are no longer required to be a member of a low-income family.
- Food stamp recipients must be at least age 18 when hired, but not age 40 or older.

Note. The February 2007 revision of Form 8850 and its instructions makes minor updates to the January 2007 revisions. Employers may continue to use the January 2007 revision of Form 8850.

Purpose of Form

Employers use Form 8850 to pre-screen and to make a written request to a SWA (unless the employee checks only the Hurricane Katrina employee box) to certify an individual as a member of a targeted group for purposes of qualifying for the work opportunity credit.

Submitting Form 8850 to the SWA (unless the employee checks only the Hurricane Katrina employee box) is but one step in the process of qualifying for the work opportunity credit. The state WOTC coordinator for the SWA must certify the job applicant is a member of a targeted group. After starting work, the employee must meet the minimum number-of-hours-worked requirement for the work opportunity credit. The employer elects to take the credit by filing Form 5884, Work Opportunity Credit.

CAUTION *The certification requirements described above do not apply to Hurricane Katrina employees. For an employer of a Hurricane Katrina employee, this form is used to accept reasonable evidence that the worker is a Hurricane Katrina employee. It is the employer's responsibility to ascertain that the place where the employee lived on August 28, 2005, (the address on line 1 of the form) is in fact in the core disaster area (see pages 2 and 3 for a list of these areas). The employer is not required to ask employees to furnish any documentary evidence.*

Who Should Complete and Sign the Form

The job applicant gives information to the employer on or before the day a job offer is made. This information is entered on Form 8850. Based on the applicant's information, the employer determines whether or not he or she believes the applicant is a member of a targeted group (as defined under Members of Targeted Groups). If the employer believes the applicant is a member of a targeted group, the employer completes the rest of the form no later than the day the job offer is made. Both the job applicant and the employer must sign Form 8850 no later than the date for submitting the form to the SWA.

Instructions for Employer

When and Where To File

Do not file Form 8850 with the Internal Revenue Service. Instead, if required, file it with your SWA no later than the 28th day after the job applicant begins work for you. Although electronic filing of Form 8850 is permitted, at the time these instructions were published, Colorado was the only state equipped to receive Form 8850 electronically. See Announcement 2002-44 for details. You can find Announcement 2002-44 on page 809 of Internal Revenue Bulletin 2002-17 at *www.irs.gov/pub/irs-irbs/irb02-17.pdf*.

To get the name, address, phone and fax numbers, and email address of the WOTC coordinator for your state, visit the Department of Labor Employment and Training Administration (ETA) website at *www.doleta.gov/business/Incentives/opptax*.

CAUTION *Never include Form 8850 with a tax return or otherwise send it to the IRS, regardless of the employee's targeted group. Form 8850 should be filed with the SWA unless the employee checks only the Hurricane Katrina employee box, in which case the employer should keep the Form 8850 for its records.*

Additional Requirements for Certification

In addition to filing Form 8850, you must complete and send to your state WOTC coordinator either:

- ETA Form 9062, Conditional Certification Form, if the job applicant received this form from a participating agency (e.g., the Jobs Corps) or
- ETA Form 9061, Individual Characteristics Form, if the job applicant did not receive a conditional certification.

You can get ETA Form 9061 from your local public employment service office or you can download it from the ETA website at *www.doleta.gov/business/Incentives/opptax.*

Recordkeeping

Keep copies of Forms 8850, any transmittal letters that you submit to your state WOTC coordinator, and certification letters you receive from your WOTC coordinator as long as they may be needed for the administration of the Internal Revenue Code provisions relating to the work opportunity credit. Records that support the credit usually must be kept for 3 years from the date any income tax return claiming the credit is due or filed, whichever is later.

CAUTION ***Hurricane Katrina employee.*** *Form 8850 should not be filed with the SWA for employees who check only box 1 on Form 8850. Employers should keep Form 8850 for their records. If a prior version of Form 8850 was sent to the SWA indicating the employee is a Hurricane Katrina employee, the employer and employee should complete this version of Form 8850 for the employer to retain for its records. Do not attach Form 8850 to a tax return.*

Members of Targeted Groups

A job applicant may be certified as a member of a targeted group if he or she is described in one of the following groups.

1. **Qualified IV-A recipient.** An individual who is a member of a family receiving assistance under a state plan approved under part A of title IV of the Social Security Act relating to Temporary Assistance for Needy Families (TANF). The assistance must be received for any 9 months during the 18-month period that ends on the hiring date.

2. **Qualified veteran.** A veteran who is a member of a family receiving assistance under the Food Stamp program for at least a 3-month period during the 15-month period ending on the hiring date. See section 51(d)(3). To be considered a veteran, the applicant must:

- Have served on active duty (not including training) in the Armed Forces of the United States for more than 180 days or have been discharged or released from active duty for a service-connected disability and
- Not have a period of active duty (not including training) of more than 90 days that ended during the 60-day period ending on the hiring date.

3. **Qualified ex-felon.** An ex-felon who has been convicted of a felony under any Federal or state law, and is hired not more than 1 year after the conviction or release from prison for that felony.

4. **High-risk youth.** An individual who is at least 18 but not yet 25 on the hiring date and lives within an empowerment zone, enterprise community, or renewal community.

5. **Vocational rehabilitation referral.** An individual who has a physical or mental disability resulting in a substantial handicap to employment and who was referred to the employer upon completion of (or while receiving) rehabilitation services by a rehabilitation agency approved by the state, an employment network under the Ticket to Work program, or the Department of Veterans Affairs.

6. **Summer youth employee.** An individual who:

- Performs services for the employer between May 1 and September 15,
- Is age 16 but not yet age 18 on the hiring date (or if later, on May 1),
- Has never worked for the employer before, and
- Lives within an empowerment zone, enterprise community, or renewal community.

7. **Food stamp recipient.** An individual who:

- Is at least age 18 but not yet age 40 on the hiring date, and
- Is a member of a family that—

a. Has received food stamps for the 6-month period ending on the hiring date or

b. Is no longer eligible for such assistance under section 6(o) of the Food Stamp Act of 1977, but the family received food stamps for at least 3 months of the 5-month period ending on the hiring date.

8. **SSI recipient.** An individual who is receiving supplemental security income benefits under title XVI of the Social Security Act (including benefits of the type described in section 1616 of the Social Security Act or section 212 of Public Law 93-66) for any month ending within the 60-day period ending on the hiring date.

9. **Long-term family assistance recipient.** An individual who is a member of a family that:

- Has received TANF payments for at least 18 consecutive months ending on the hiring date, or
- Receives TANF payments for any 18 months (whether or not consecutive) beginning after August 5, 1997, and the earliest 18-month period beginning after August 5, 1997, ended within the last 2 years, or
- Stopped being eligible for TANF payments because Federal or state law limits the maximum period such assistance is payable and the individual is hired not more than 2 years after such eligibility ended.

10. **Hurricane Katrina employee.** A Hurricane Katrina employee is a person who, on August 28, 2005, had a main home in the core disaster area and, within a two-year period beginning on this date, is hired to perform services principally in the core disaster area.

Gulf Opportunity (GO) Zone (Core Disaster Area). The GO Zone (also called the core disaster area) covers the portion of the Hurricane Katrina disaster area determined by the Federal Emergency Management Agency (FEMA) to be eligible for either individual only or both individual and public assistance from the Federal Government. The GO Zone covers the following areas in three states.

a. **Alabama.** The counties of Baldwin, Choctaw, Clarke, Greene, Hale, Marengo, Mobile, Pickens, Sumter, Tuscaloosa, and Washington.

b. **Louisiana.** The parishes of Acadia, Ascension, Assumption, Calcasieu, Cameron, East Baton Rouge, East Feliciana, Iberia, Iberville, Jefferson, Jefferson Davis, Lafayette, Lafourche, Livingston, Orleans, Plaquemines, Pointe Coupee, St. Bernard, St. Charles, St. Helena, St. James, St. John the Baptist, St. Martin, St. Mary, St. Tammany, Tangipahoa, Terrebonne, Vermilion, Washington, West Baton Rouge, and West Feliciana.

c. **Mississippi.** The counties of Adams, Amite, Attala, Choctow, Claiborne, Clarke, Copiah, Covington, Forrest, Franklin, George, Greene, Hancock, Harrison, Hinds, Holmes, Humphreys, Jackson, Jasper, Jefferson, Jefferson Davis, Jones, Kemper, Lamar, Lauderdale, Lawrence, Leake, Lincoln, Lowndes, Madison, Marion, Neshoba, Newton, Noxubee, Oktibbeha, Pearl River,

Perry, Pike, Rankin, Scott, Simpson, Smith, Stone, Walthall, Warren, Wayne, Wilkinson, Winston, and Yazoo.

Empowerment zones, enterprise communities, and renewal communities. For details on all empowerment zones, enterprise communities, and renewal communities, you can use the RC/EZ/EC Address Locator at *http://egis.hud.gov/egis/cpd/rcezec/welcome.htm*. For details about empowerment zones, enterprise communities, and renewal communities, call 1-800-998-9999, or contact your SWA. For more information about empowerment zones, enterprise communities, and renewal communities, see Publication 954, Tax Incentives for Distressed Communities.

Washington, DC. Under section 1400, parts of Washington, DC, are treated as an empowerment zone. For details, use the RC/EZ/EC Address Locator at *http://egis.hud.gov/egis/cpd/rcezec/welcome.htm* or see Notice 98-57, on page 9 of Internal Revenue Bulletin 1998-47 at *www.irs.gov/pub/irs-irbs/irb98-47.pdf.*

TIP *There are no designated areas in Colorado, Delaware, Idaho, Iowa, Nebraska, Nevada, New Hampshire, North Carolina, Rhode Island, or Wyoming. There are also no areas designated in Puerto Rico, Guam, or any U.S. possession.*

Member of a Family

With respect to the qualified IV-A recipient, qualified veteran, food stamp recipient, and long-term family assistance recipient, an individual whose family receives assistance for the requisite period meets the family assistance requirement of the applicable group if the individual is included on the grant (and thus receives assistance) for some portion of the specified period.

Appendix E

U.S. DOL FORM ETA-9061

Individual Characteristics Form
Work Opportunity and
Welfare-to-Work Tax Credits

U.S. Department of Labor
Employment & Training Administration

1. CONTROL NO. (For Agency Use Only)	Individual Information (Instructions on the Back)	OMB No. 1205-0371 2. DATE RECEIVED (For Agency Use Only)

3. EMPLOYER NAME/ADDRESS	4. EMPLOYER FEDERAL ID NO. 6. Have you worked for the above employer before? Yes_____ No_____	5. EMPLOYMENT START DATE: Starting Wage: $_____ per hour POSITION:
7. NAME OF INDIVIDUAL (Last, First, Middle)		8. SOCIAL SECURITY NUMBER:

The above named individual is determined to have the following characteristics for WOTC Target Group Certification:

9. Age between 18 - 25? Yes_____ No_____ If YES, indicate your "Date of Birth" below: Date of Birth:	10. Is a veteran and a member of a family that received Food Stamps fora period of at least 3 months in the last 15 months. Yes_____ No_____ If YES, also complete Box 17.	11. Is a member of a family that received TANF benefits for any 9 months in the last 18 months. Yes_____ No_____ If YES, also complete Box 17.
12. Is a member of a family that received Food Stamps for the last 8 months. Yes_____ No_____ or for at least a 3-month period within the last 5 months, BUT is no longer receiving them. Yes_____ No_____ If YES to either, also complete Box 17.	13. In the past year has been convicted of a felony or released from prison after a felony conviction. Yes_____ No_____ If YES, complete below: Date of Conviction _____ Date of Release _____ Total income for the 6 months prior to hire date for all family members living in the same household. Total Income: _____ (If no income, enter 0 above) No. of family members living in the same household for the 6 mos., prior to hire date, including yourself: _____	14. Lives and plans to continue living in a federal Empowerment Zone, Enterprise Round II or Renewal Community. Yes _____ No ____ 16. Received Supplemental Security Income (SSI) benefits for any month ending within the last 60 days. Yes_____ No_____ 17. If individual is not a primary recipient of benefits, please provide the following: _____ Name of Primary Recipient _____ City/State of Benefits
15. Is receiving or has received Rehabilitation Services through a State Rehabilitation Services' program or the Veterans' Administration. Yes_____ No_____		

18. Is a "ticket holder" under the Ticket to Work Program Yes _____ No _____	19. The "ticket holder" has an Individual Work Plan (IWP) from an Empowerment Zone (EN). Yes _____ No _____

Section 20 is to be completed by individuals starting to work after December 31, 1997, under the Welfare –to-Work Tax Credit only.

20. Is a member of a family that:

- Has received TANF payments for at least the last 18 consecutive months; Yes _____ No _____ or
- Has received/is receiving TANF payments for any 18 months starting after August 5, 1997; and the earliest 18-month period beginning after August 5, 1997, and ended within the last 2 years; or Yes _____ No _____ or
- Stopped being eligible for TANF payments within the last 2 years because Federal or state law limited the maximum time those payments could be made. Yes _____ No _____

21. SOURCES USED TO DOCUMENT ELIGIBILITY:

Note: I certify that the Information is true and correct to the best of my knowledge. I understand that the information above may be subject to verification. The signature of the party completing this form is required below.

22. SIGNATURE:	23. DATE:

INSTRUCTIONS FOR COMPLETING THE INDIVIDUAL CHARACTERISTICS FORM (ICF), ETA 9061. This form is used together with IRS Form 8850 to help SWAs determine eligibility for the Work Opportunity and Welfare-to-Work Tax Credits. The form may be completed by the applicant, the employer or employer representative/consultant, the SWA/DLA or the Participating Agency and signed by the person or agency filling out this form. This form is required to be used, without modification, by all employers and/or their representatives seeking the WOTC or the WtW tax credit.

Box 1: **Control Number (for agency use only).** The SWA/DLA or participating agency determines the Control Number. It may be a Social Security Number, case number, or other appropriate designation which permits easy filing, identification and retrieval of forms. Enter this number here.

Box 2: **Date (for agency use only).** Enter the month, day, and year when the form is received.

Box 3: **Employer Name/Address.** Enter the name and address including zip code and telephone number of the employer applying for a WOTC or WtWTC Employer Certification.

Box 4: **Employer Federal ID No.** Enter employer's federal taxpayer identification number.

Box 5: **Employment-Start Date/Wage/Position or Title.** Enter the employment start date, the starting hourly wage, that the employee will be paid. If not known, enter an estimated wage. Also, enter the job or position title, under which the individual or prospective employee will be performing for this employer.

Box 6: **Previous Employment for This Employer.** This requires a YES or NO answer. Enter a check mark (✓) in the corresponding blank.

Box 7: **Name of Individual.** Enter full name of Individual or prospective employee.

Box 8: **Social Security Number.** Enter individual's social security number here.

Boxes 9 through 20 (Read each box carefully). Enter a check mark (✓) to indicate If your answer is a YES or a NO. Provide additional information where requested for either the WOTC or the WtW tax credit's target group eligibility.

Box 17: **Name and Address.** Enter name and address of individual who is the primary recipient of benefits.

Box 21. **Sources to Document Eligibility.** List and/or describe the documentary* evidence or sources of collateral contacts that are attached to the ICF form or that will be provided. Indicate in parentheses, next to each document listed, whether it is attached or forthcoming. Some examples are provided below. Employers may also obtain a letter from the agency that administers a relevant program, stating that the employee or a member of his/her household meets one of the eligibility requirements.

Examples of Documentary Evidence or Collateral Contacts:

AGE/BIRTHDATE:
(Required for High-Risk Summer Youth & Food Stamp)
- Birth Certificate
- Driver's License
- School I.D. Card*
- Work Permit
- Federal/State/Local Gov't I.D.*
- Hospital Record of Birth

FAMILY INCOME:
(Required for Ex-felon)
- Pay Stubs
- Employer Contacts
- W-2 Forms
- UI Documents
- Public Assistance Records of No. of Months Benefits Were Received.
- Family Members' Statements
- Parole Officer's Name
- Parole Officer's Statements

SSI RECIPIENT:
- SSI Record or Authorization
- SSI Contact
- Evidence of SSI Issuance

EX-FELON STATUS:
- Parole Officer's Name
- Correction Institution Records
- Court Record, Extracts

TANF (IV-A) RECIPIENT:
- TANF Benefit History
- Signed Statement from Authorized Individual w/ Specific Description of Months Benefits Were Received.
- Case Number Identifier

NUMBER IN FAMILY
- Public Assistance
- Social Services Agencies

VETERANS' STATUS:
- DD-214
- Reserve Unit Contacts
- Discharge Papers*

VOCATIONAL REHABILITATION REFERRAL:
- Voc. Rehab. Agency

VOC REHAB (Continued)
Contact
- Signed statement from authorized individual w/specific description of months benefits received
- Veterans Administration Records

WtW LONG-TERM ASSISTANCE RECIPIENT
- TANF Benefits History
- Signed Statement from authorized individual with specific description of months benefits received
- Case Number Identifier

EMPOWERMENT ZONES/ENTERPRISE/ RENEWAL COMMUNITIES:
- Driver's License
- Work Permit
- Utility Bills
- Signed Statement From Authorized Individual w/ Specific Description
- Lease Document

EZ/EC/RCs (Continued)
- Voter Registration Card
- Food Stamp Award Letter
- Social Security Agency Letter
- Library Card**
- Landlord's Statement
- Letter From Social Service Agencies
- School Records
- Medicaid/Medicare Card
- Property Tax Record
- Public Assistance Record
- Rent Receipts
- School I.D. Card**
- W-4
- Selective Service Registration Card

TICKET HOLDER (Ticket to Work Program)
- SWAs must establish applicant's eligibility by calling MAXIMUS to verify if applicant: 1) is a ticket holder and 2) has and IWP from an Employment Network (EN).

NOTE: This list is not an exhaustive list. For more information, contact your WOTC public State Workforce Agency.

*Where any item of documentation such as a Federal I.D. Card does not contain age or birth date, the SWA/DLA must obtain another documentary source to verify the individual's age.

**Where any item of documentary evidence, such as library card does not contain the holder's address, the SWA/DLA must obtains documentary evidence issued in the jurisdiction where the EZ/EC or RC is located showing the holder's address.

Box 18. Is a "ticket holder" under the Ticket to Work Program. This requires a YES or NO answer. Enter a check mark (✓) in the corresponding blank.

Box 19. The "ticket holder" has an Individual Work Plan (IWP) from an employment network. This requires a YES or NO answer. Enter a check mark (✓) in the corresponding blank.

Box 22. Signature. If applicant completes this form, he/she must enter signature here. If applicant is a minor, the parent or guardian should sign this box. If form is completed by the employer or his/her representative, enter corresponding signature here. If form was completed by the intake staff of a SWA/DLA or participating agency, enter corresponding signature in this box.

Box 23. Date. Enter the month, day and year when the form was completed.

Persons are not required to respond to this collection of Information unless it displays a currently valid OMB Control number. Respondent's obligation to reply to these requirements is required to obtain and retain benefits per P.L. 104-184. Public reporting burden for this collection of information is estimated to average .33 minutes per response, including the time for reading instructions, searching existing data sources, gathering and maintaining the data needed; and completing and reviewing the intonation. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, U.S. Employment Service, Room C-4514, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0371).

(Cut along doted line and keep in your files)

TO THE JOB APPLICANT OR EMPLOYEE:

THE INFORMATION AND THE SUPPORTING DOCUMENTATION YOU HAVE PROVIDED IN COMPLETING THIS FORM —OR IN SOME CASES OTHER INFORMATION THAT COULD VERIFY THE RESPONSES YOU HAVE GIVEN TO THE ITEMS/QUESTIONS IN THIS FORM— WILL BE DISCLOSED BY YOUR EMPLOYER TO THE STATE WORKFORCE AGENCY (SWA) [ENTER CORRESPONDING SWA NAME BELOW:

_____

IN ORDER TO QUALIFY FOR A FEDERAL EMPLOYER TAX CREDIT, PROVISION OF THIS INFORMATION IS VOLUNTARY. HOWEVER, THE INFORMATION IS REQUIRED FOR YOUR EMPLOYER TO RECEIVE THE FEDERAL TAX CREDIT. IF THE INFORMATION YOU PROVIDE IS ABOUT A MEMBER OF YOUR FAMILY, YOU SHOULD PROVIDE HIM/HER A COPY OF THIS NOTICE.

Appendix F

SSA FORM SSA-7004-SM

Form Approved
OMB No. 0960-0466 ☐ SP

Request for Earnings and Benefit Estimate Statement

☐ Please check this box if you want to get your statement in Spanish instead of English.

Please print or type your answers. When you have completed the form, fold it and mail it to us. (If you prefer to send your request using the Internet, contact us at http://www.ssa.gov)

1. Name shown on your Social Security card:

First Name _____ Middle Initial _____

Last Name Only _____

2. Your Social Security number as shown on your card:

☐☐☐-☐☐-☐☐☐☐

3. Your date of birth (Mo.-Day-Yr.)

☐☐-☐☐-☐☐☐☐

4. Other Social Security numbers you have used:

☐☐☐-☐☐-☐☐☐☐

☐☐☐-☐☐-☐☐☐☐

5. Your sex: ☐ Male ☐ Female

For items 6 and 8 show only earnings covered by Social Security. Do NOT include wages from State, local or Federal Government employment that are NOT covered for Social Security or that are covered ONLY by Medicare.

6. Show your actual earnings (wages and/or net self-employment income) for last year and your estimated earnings for this year.

A. Last year's actual earnings: *(Dollars Only)*

$ ☐☐☐,☐☐☐.00

B. This year's estimated earnings: *(Dollars Only)*

$ ☐☐☐,☐☐☐.00

7. Show the age at which you plan to stop working.

☐☐ *(Show only one age)*

8. Below, show the average yearly amount (not your total future lifetime earnings) that you think you will earn between now and when you plan to stop working. Include performance or scheduled pay increases or bonuses, but not cost-of-living increases.

If you expect to earn significantly more or less in the future due to promotions, job changes, part-time work, or an absence from the work force, enter the amount that most closely reflects your future average yearly earnings.

If you don't expect any significant changes, show the same amount you are earning now (the amount in 6B).

Future average yearly earnings: *(Dollars Only)*

$ ☐☐☐,☐☐☐.00

9. Do you want us to send the statement:
   - To you? Enter your name and mailing address.
   - To someone else (your accountant, pension plan, etc.)? Enter your name with "c/o" and the name and address of that person or organization.

Name _____

Street Address (Include Apt. No., P.O. Box, or Rural Route) _____

City _____ State _____ Zip Code _____

Notice:
I am asking for information about my own Social Security record or the record of a person I am authorized to represent. I understand that if I deliberately request information under false pretenses, I may be guilty of a Federal crime and could be fined and/or imprisoned. I authorize you to use a contractor to send the statement of earnings and benefit estimates to the person named in item 9.

▶

Please sign your name (Do Not Print)

Date _____ (Area Code) Daytime Telephone No. _____

Bridgepoint

About The Privacy Act
Social Security is allowed to collect the facts on this form under Section 205 of the Social Security Act. We need them to quickly identify your record and prepare the earnings statement you asked us for. Giving us these facts is voluntary. However, without them we may not be able to give you an earnings and benefit estimate statement. Neither the Social Security Administration nor its contractor will use the information for any other purpose.

Paperwork Reduction Act Notice and Time It Takes Statement
The Paperwork Reduction Act of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of section 3507 of the Paperwork Reduction Act of 1995. We may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB control number. We estimate that it will take you about 5 minutes to complete this form. This includes the time it will take to read the instructions, gather the necessary facts and fill out the form.

Mailing Address

Social Security Administration
Wilkes Barre Data Operations Center
PO Box 7004
Wilkes Barre PA 18767-7004

SOCIAL SECURITY ADMINISTRATION

Request for Earnings and Benefit Estimate Statement

Thank you for requesting this statement.

After you complete and return this form, we will--within 4 to 6 weeks--send you:

- a record of your earnings history and an estimate of how much you have paid in Social Security taxes, and
- estimates of benefits you (and your family) may be eligible for now and in the future.

We're pleased to furnish you with this information and we hope you'll find it useful in planning your financial future.

Social Security is more than just a program for retired people. It helps people of all ages in many ways. Whether you're young or old, male or female, single or with a family--Social Security can help you when you need it most. It can help support your family in the event of your death and pay you benefits if you become severly disabled.

If you have questions about Social Security or this form, please call our toll-free number, 1-800-772-1213.

Kenneth S. Apfel
Commissioner of Social Security

PROOF OF IDENTITY
(Form I-9)

U.S. Department of Justice
Immigration and Naturalization Service

OMB No. 1115-0136
Employment Eligibility Verification

INSTRUCTIONS

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM.

Anti-Discrimination Notice. It is illegal to discriminate against any individual (other than an alien not authorized to work in the U.S.) in hiring, discharging, or recruiting or referring for a fee because of that individual's national origin or citizenship status. It is illegal to discriminate against work eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1 - Employee. All employees, citizens noncitizens, hired after November 6, 1986, must complete Section 1 of this form at the time of hire, which is the actual beginning of employment. **The employer is responsible for ensuring that Section 1 is timely and properly completed.**

Preparer/Translator Certification. The Preparer/Translator Certification must be completed if Section 1 is prepared by a person other than the employee. A preparer/translator may be used only when the employee is unable to complete Section 1 on his/her own. However, the employee must still sign Section 1 personally.

Section 2 - Employer. For the purpose of completing this form, the term "employer" includes those recruiters and referrers for a fee who are agricultural associations, agricultural employers, or farm labor contractors.

Employers must complete Section 2 by examining evidence of identity and employment eligibility within three (3) business days of the date employment begins. If employees are authorized to work, but are unable to present the required document(s) within three business days, they must present a receipt for the application of the document(s) within three business days and the actual document(s) within ninety (90) days. However, if employers hire individuals for a duration of less than three business days, Section 2 must be completed at the time employment begins. **Employers must record**: **1**) document title; **2**) issuing authority; **3**) document number, **4**) expiration date, if any; and **5**) the date employment begins. Employers must sign and date the certification. Employees must present original documents. Employers may, but are not required to, photocopy the document(s) presented. These photocopies may only be used for the verification process and must be retained with the I-9. **However, employers are still responsible for completing the I-9.**

Section 3 - Updating and Reverification. Employers must complete Section 3 when updating and/or reverifying the I-9. Employers must reverify employment eligibility of their employees on or before the expiration date recorded in Section 1. Employers **CANNOT** specify which document(s) they will accept from an employee.

- If an employee's name has changed at the time this form is being updated/ reverified, complete Block A.
- If an employee is rehired within three (3) years of the date this form was originally completed and the employee is still eligible to be employed on the same basis as previously indicated on this form (updating), complete Block B and the signature block.

and • If an employee is rehired within three (3) years of the date this form was originally completed and the employee's work authorization has expired **or** if a current employee's work authorization is about to expire (reverification), complete Block B and:
  - examine any document that reflects that the employee is authorized to work in the U.S. (see List A **or** C),
  - record the document title, document number and expiration date (if any) in Block C, and
  - complete the signature block.

Photocopying and Retaining Form I-9. A blank I-9 may be reproduced provided both sides are copied. The Instructions must be available to all employees completing this form. Employers must retain completed I-9s for three (3) years after the date of hire **or** one (1) year after the date employment ends, whichever is later.

For more detailed information, you may refer to the INS Handbook for Employers, (Form M-274). You may obtain the handbook at your local INS office.

Privacy Act Notice. The authority for collecting this information is the Immigration Reform and Control Act of 1986, Pub. L. 99-603 (8 U.S.C. 1324a).

This information is for employers to verify the eligibility of individuals for employment to preclude the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States.

This information will be used by employers as a record of their basis for determining eligibility of an employee to work in the United States. The form will be kept by the employer and made available for inspection by officials of the U.S. Immigration and Naturalization Service, the Department of Labor, and the Office of Special Counsel for Immigration Related Unfair Employment Practices.

Submission of the information required in this form is voluntary. However, an individual may not begin employment unless this form is completed since employers are subject to civil or criminal penalties if they do not comply with the Immigration Reform and Control Act of 1986.

Reporting Burden. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. Accordingly, the reporting burden for this collection of information is computed as follows: **1**) learning about this form, 5 minutes; **2**) completing the form, 5 minutes; and **3**) assembling and filing (recordkeeping) the form, 5 minutes, for an average of 15 minutes per response. If you have comments regarding the accuracy of this burden estimate, or suggestions for making this form simpler, you can write to both the Immigration and Naturalization Service, 425 I Street, N.W., Room 5304, Washington, D. C. 20536; and the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-0136, Washington, D.C. 20503.

Form I-9 (Rev. 11-21-91) N

EMPLOYERS MUST RETAIN COMPLETED I-9
PLEASE DO NOT MAIL COMPLETED I-9 TO INS

LISTS OF ACCEPTABLE DOCUMENTS

LIST A

Documents that Establish Both Identity and Employment Eligibility

1. U.S. Passport (unexpired or expired)
2. Certificate of U.S. Citizenship *(INS Form N-560 or N-561)*
3. Certificate of Naturalization *(INS Form N-550 or N-570)*
4. Unexpired foreign passport, with *I-551 stamp or* attached *INS Form I-94* indicating unexpired employment authorization
5. Alien Registration Receipt Card with photograph *(INS Form I-151 or I-551)*
6. Unexpired Temporary Resident Card *(INS Form I-688)*
7. Unexpired Employment Authorization Card *(INS Form I-688A)*
8. Unexpired Reentry Permit *(INS Form I-327)*
9. Unexpired Refugee Travel Document *(INS Form I-571)*
10. Unexpired Employment Authorization Document issued by the INS which contains a photograph *(INS Form I-688B)*

OR

LIST B

Documents that Establish Identity

1. Driver's license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address
2. ID card issued by federal, state, or local government agencies or entities provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address
3. School ID card with a photograph
4. Voter's registration card
5. U.S. Military card or draft record
6. Military dependent's ID card
7. U.S. Coast Guard Merchant Mariner Card
8. Native American tribal document
9. Driver's license issued by a Canadian government authority

For persons under age 18 who are unable to present a document listed above:

10. School record or report card
11. Clinic, doctor, or hospital record
12. Day-care or nursery school record

AND

LIST C

Documents that Establish Employment Eligibility

1. U.S. social security card issued by the Social Security Administration *(other than a card stating it is not valid for employment)*
2. Certification of Birth Abroad issued by the Department of State *(Form FS-545 or Form DS-1350)*
3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal
4. Native American tribal document
5. U.S. Citizen ID Card *(INS Form I-197)*
6. ID Card for use of Resident Citizen in the United States *(INS Form I-179)*
7. Unexpired employment authorization document issued by the INS *(other than those listed under List A)*

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274)

Form I-9 (Rev. 11-21-91) N

U.S. Department of Justice
Immigration and Naturalization Service

OMB No. 1115-0136
Employment Eligibility Verification

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE. It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification. To be completed and signed by employee at the time employment begins

Print Name: Last	First	Middle Initial	Maiden Name
Address *(Street Name and Number)*		Apt. #	Date of Birth *(month/day/year)*
City	State	Zip Code	Social Security #

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following):
A citizen or national of the United States
A Lawful Permanent Resident (Alien # A_____
An alien authorized to work until___/___/___
(Alien # or Admission #_____

Employee's Signature	Date *(month/day/year)*

Preparer and/or Translator Certification. *(To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.*

Preparer's/Translator's Signature	Print Name
Address *(Street Name and Number, City, State, Zip Code)*	Date *(month/day/year)*

Section 2. Employer Review and Verification. To be completed and signed by employer. **Examine one document from List A OR examine one document from List B and one from List C** as listed on the reverse of this form and record the title, number and expiration date, if any, of the document(s)

	List A	**OR**	**List B**	**AND**	**List C**
Document title:	_____		_____		_____
Issuing authority:	_____		_____		_____
Document #:	_____		_____		_____
Expiration Date *(if any)*:	__/__/__		__/__/__		__/__/__
Document #:	_____				
Expiration Date *(if any)*:	__/__/__				

CERTIFICATION - I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on *(month/day/year)* ___/___/___and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment).

Signature of Employer or Authorized Representative	Print Name	Title
Business or Organization Name	Address *(Street Name and Number, City, State, Zip Code)*	Date *(month/day/year)*

Section 3. Updating and Reverification. To be completed and signed by employer

A. New Name *(if applicable)*	B. Date of rehire *(month/day/year) (if applicable)*

C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.
Document Title:_____Document #:_____Expiration Date (if any):__/__/__

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative	Date *(month/day/year)*

Form I-9 (Rev. 11-21-91) N

U.S. Department of Justice
Immigration and Naturalization Service

OMB No. 1115-0136
Employment Eligibility Verification

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and
- If an employee is rehired within three (3) years of the date this form was originally completed and the employee's work authorization has expired **or** if a current employee's work authorization is about to expire (reverification), complete Block B and:
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Submission of the information required in this form is voluntary. However, an individual may not begin employment unless this form is completed since employers are subject to civil or criminal penalties if they do not comply with the Immigration Reform and Control Act of 1986.

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Form I-9 (Rev. 11-21-91) N

EMPLOYERS MUST RETAIN COMPLETED I-9
PLEASE DO NOT MAIL COMPLETED I-9 TO INS

Appendix H

RELEASE GRATUITIES FOR FEDERAL PRISONERS

Release Gratuities for Federal Prisoners

The Release Gratuities, Transportation, and Clothing program is offered primarily to sentenced federal prisoners who are being released. Additionally, the court may direct the United States Marshals Service (USMS) to afford similar gratuities to pretrial detainees housed in Bureau of Prisons (BOP) facilities who are arrested, but not indicted, indicted but not convicted, or who are released to probation. Although the BOP will ordinarily afford pretrial detainees with adequate clothing upon release, monetary release gratuities paid to pretrial detainees are the exclusive responsibility of the USMS. Designated federal inmates released from BOP institutions will be provided clothing, transportation to their release destinations, and appropriate funds (up to $500) based upon an inmate's release needs and budgetary and statutory limitations.

Release gratuities are intended to be a means to supplement inmates' "other" resources upon release from prison, and to help them readjust back into the community. They are not intended to provide for an inmate's entire release needs. Therefore, inmates should be encouraged to save funds for release (such as industrial and performance pay and outside receipts) in their respective trust fund accounts or independent savings accounts. To request a release gratuity, inmates should meet with their Unit Team.

For further information, please review **Program Statement 5873.06, Release Gratuities, Transportation, and Clothing**. Moreover, concerns relating to a release gratuity fall specifically within the BOP's **Administrative Remedy Process, Title 28 C.F.R. § 542.** Inmates are encouraged to raise any release gratuity concerns through that process.

BP-S189.051 **RELEASE & GRATUITY INFORMATION** CDFRM MAY 94

U.S. DEPARTMENT OF JUSTICEFEDERAL BUREAU OF PRISONS

To: COMMISSARY From: Case Manager	Institution Date

Please enter personal account information and return to Release Clerk/Unit Secy:

Register Number	Name	Funds in Personal Account	$
Release Date	Method		
Unit	Work Detail	Anticipated Earnings Prior to Release	
		Anticipated Spending Prior to Release	
		U.S. Savings Bonds	
		Received last 6 months	
		Spent last 6 months	
		Excess Funds to be Disposed	
		Commissary Clerk:/s/	

CASE MANAGER WILL COMPLETE THE FOLLOWING:

To: COMMISSARY Date

From: Case Manager

1.You are authorized to pay cash gratuity in the amount of:	$
2. If detainer is removed, subject will be given:	
3. Dispose of excess funds as follows: a. Obtain check for delivery to inmate up release in amount of: b. Mail check in the amount of :	
To:	
4. Release Destination	
5. Transportation: ☐ Government Expense ☐ Private	

/s/ Approved By:

Record Copy - Commissary; Copy - Case Manager; Copy - Commissary; Copy - Release File

Appendix I

FEDERAL BONDING PROGRAM
STATE OFFICES

FEDERAL BONDING PROGRAM
STATE OFFICES

(as of 12/27/06)

ALABAMA

Bonding Services Coordinator
Industrial Relations Building, Rm. 2805
649 Monroe Street
Montgomery, AL 36131
334-242-8039 / 334-242-8012 (fax)

ALASKA
Bonding Services Coordinator
AK Employment Security Div.
P.O. Box 25509
Juneau, AK 99802-5509
907-465-5955 / 907-465-8753 (fax)

ARIZONA
Bonding Services Coordinator
Employment & Training Administration
AZ Dept of Economic Security/734-T Site Code
P.O. Box 6123
Phoenix, AZ 85005
602-495-1861 ext. 1002 / 602-542-2110 (fax)

ARKANSAS
Bonding Services Coordinator
Employment Service Technical Unit
AR Employment Security Dept
P.O. Box 2981
Little Rock, AR 72203-2981
501-682-3143 / 501-682-2576 (fax)

CALIFORNIA
Bonding Services Coordinator
CA Employment Development Dept
800 Capitol Mall/MIC-37
Sacramento, CA 95814
916-653 -2497 / 916-654-9119 (fax)

COLORADO
Bonding Services Coordinator
CO Dept of Labor & Employment
Tower 2, Suite 400
1515 Arapahoe St.
Denver, CO 80202-2117
303-318-8823 / 303-318-8930 (fax)

CONNECTICUT
Bonding Services Coordinator/Ops Support Unit
Connecticut Dept of Labor
200 Folly Brook Blvd., 3rd floor
Wethersfield, CT 06109
860-263-6066 / 860-263-6039 (fax)

DELAWARE
Bonding Services Coordinator/Div of Emp. Training
Division of Employment Training
DE Dept of Labor
4425 North Market Street, 1st floor
Wilmington, DE 19802
302-761-8123 / 302-761-4689 (fax)

DISTRICT OF COLUMBIA
Head of Job Bank
D.C. Dept of Employment Services
609 H Street, NE
Washington, DC 20002
202-698-3540 / 202-698-5720 (fax)

FLORIDA
Bonding Services Coordinator
FL Agency for Workforce Innovation
107 E. Madison Street
Tallahassee, FL 32399-4120
850-245-7426 / 850-921-3859 (fax)

GEORGIA
Bonding Services Coordinator
GA Dept of Labor/Sussex Place
148 Andrew Young Int'l Blvd., N.E.
Suite 276
Atlanta, GA 30303
404-232-3538 / 404-656-0783 (fax)

GUAM
Administrator, SCSEP
Dept of Labor
P.O. Box 9970
Tamuning, Guam 96931

HAWAII
Bonding Services Coordinator
Workforce Development Division
HI State Employment Service
830 Punchbowl Street, Room 329
Honolulu, HI 96813
808-586-8815 / 808-586-8822 (fax)s

IOWA
Bonding Services Coordinator
Iowa Workforce Development
150 Des Moines St.
Des Moines, IA 50309
515-281-9097
515-281-9096 fax

ILLINOIS
Bonding Services Coordinator
IL Dept of Employment Security
33 S. State Street
8th Floor South
Chicago, IL 60603
312-793-9741 / 312-793-1871 fax

IDAHO
Bonding Services Coordinator
ID Dept of Employment
317 West Main Street
Boise, ID 83735
208-332-3570 (x-3330)
208-332-7417 fax

INDIANA
No longer participates in the Federal Bonding Program.

KANSAS
Bonding Services Coordinator
KS Dept of Commerce
1000 SW Jackson Street, Suite 100
Topeka, KS 66612-1354
785-296-7435 / 785-368-7108 fax

KENTUCKY
Kentucky does not participate in the Federal Bonding Program. Contact the One-Stop for assistance with general jobs and training assistance. Refer the call to Ron Rubbin at 1-800-233-2258 ext. 246, or Roland Brack at 1-800-233-2258 ext. 271.

LOUISIANA
Bonding Services Coordinator
Division of Probation and Parole, Region IV
731 St. Charles Ave., 3rd floor
New Orleans, LA 70130
504-568-8690

MAINE
Bonding Services Coordinator
Bureau of Employment Services
ME Dept of Labor
55 State House Station
Augusta, ME 04333
207-624-6390 / 207-624-6499 (fax)

MARYLAND
Bonding Services Coordinator
MD Dept of Labor, Licensing, and Regulations
Division of Workforce Development
1100 N. Eutaw Street, Suite 209
Baltimore, MD 21201
410-767-2018 / 410-333-5162 (fax)

MASSACHUSETTS
Bonding Services Coordinator -Special Programs-Bonding
MA Division of Employment Training and Training
Charles F. Hurley Bldg.-Government Center
19 Staniford Street, 1st Floor
Boston, MA 02114
617-626-5733 / 617-727-2039 (fax)

MICHIGAN
Bureau of Workforce Programs
Department of Labor and Economic Growth
3032 W. Grand Blvd., Suite 9-450
Detroit, MI 48202
313-456-3169 / 313-456-3162 (fax)

MINNESOTA
Bonding Services Coord.- Re-employment Program
MN Dept. Of Employment and Economic Development
332 Ninn St., Suite E-200 - MN Job Bank
1st National Bank Building
St. Paul, MN 55101
651-296-8400 / 651-246-3488 (fax)

MISSOURI
Dept. of Economic Development
MO Division of Workforce Development
421 East Dunklin
POB 1087
Jefferson City, MO 65102
573-526-8217 / 573-522-9496 (fax)

MONTANA
Bonding Services Coordinator
Job Service Division
MT Dept of Labor & Industry
P.O. Box 1728
Capital Station
Helena, MT 59624
406-444-3480 / 406-444-3037 (fax)

NEBRASKA
Bonding Services Coordinator -Legal Division
Nebraska Department of Labor
550 S. 16th Street
Lincoln, NE 68509
402-471-9917

NEVADA
Bonding Services Coordinator
NV State Employment Service
500 E. Third Street
Carson City, NV 89713
775-684-0301or 0305 / 775-684-0327 (fax)

NEW HAMPSHIRE
Bonding Services Coordinator
NH Dept of Employment Security
32 South Main Street
Concord, NH 03301
603-228-4083 / 603-229-4321 (fax)

NEW JERSEY
Bonding Services Coordinator
Division of Employment & Training
NJ Dept. of Labor
P.O. Box 055, 2nd floor
Trenton, NJ 08625
609-777-2569 / 609-777-3020 fax

NEW MEXICO
State WOTC Coordinator
Employment & Training Support Section
NM Dept. of Labor - Field Service Bureau-WOTC
P.O. Box 1928
Albuquerque, NM 87103
505-841-8501 / 505-841-8467 (fax)

NEW YORK
Bonding Services Coordinator
Division of Employment Services – Rm 421
NY State Department of Labor-State Campus - Bldg 12
Albany, NY 12240
518-485-2151 / 518-457-4625 (fax)

NORTH CAROLINA
Bonding Services Coordinator
NC Emp. Security Comm.-Applicant Services
P.O. Box 27625
Raleigh, NC 27611
919-733-4896 / 919-733-3010 (fax)

NORTH DAKOTA
Bonding Services Coordinator-Job Service ND
P.O. Box 5507
Bismarck, ND 58506-5507
701-328-2863 / 701-328-4894 (fax)

OHIO
Offender Job Linkage Administration

OH Dept of Rehabilitation and Correction
1050 Freeway Drive North
Columbus, OH 43229
614-728-1534 / 614-995-0128 fax

OKLAHOMA
Bonding Services Coordinator
OK Employment Security Commission
2401 North Lincoln Blvd., Suite 454
Oklahoma City, OK 73152
405-557-7257 (x-5347) / 405-524-6081 (fax)

OREGON
Oregon does not participate in the Federal Bonding Program. Contact the One-Stop for general jobs and training assistance. Refer calls on the Federal Bonding Program to Ron Rubbin at 1-800-233-2258 ext. 246, or Roland Brack at 1-800-233-2258 ext. 271.

PENNSYLVANIA
Bonding Services Coordinator (Providence only)
PA Bureau of Workforce Investment
Labor & Industry Building, 13th floor
Seventh & Forster Streets
Harrisburg, PA 17120
717-787-6915 / 717-787-5785 (fax)

PUERTO RICO
Bonding Services Coordinators
One-Stop Career Center of PR, Inc.
Condonminio Plaze Universidad 200
Calle Anasco 839 local 65
Rio Piedras, PR 00928
787-296-1785 / 787-747-5695 (fax)

RHODE ISLAND
State Coordinator
160 Broad Street
Providence, RI 02903
401-521-2255 (x-139) / 401-521-7410 (fax)

SOUTH CAROLINA
Bonding Services Coordinator
SC Employment Security Commission
1550 Gadsden Street
P.O. Box 1406
Columbia, SC 29202
803-737-2593 / 803-737-0140 fax

SOUTH DAKOTA
South Dakota does not participate in the Federal Bonding Program. Contact the One-Stop for general jobs and training assistance. For information on the Federal Bonding Program, call Ron Rubbin at 1-800-233-2258 ext. 246, or Roland Brack at 1-800-233-2258 ext. 271.

TENNESSEE
Bonding Services Coordinator
Job Service Program Support
TN Dept of Labor & Workforce Development
Davy Crockett Tower, 11th floor
500 James Robertson Parkway
Nashville, TN 37245-1200
615-741-3780 (x-578) / 615-741-6392 (fax)

TEXAS
Bonding Services Coordinator - Project RIO
Texas Workforce Commission
101 E. 15th Street, Room 440-T
Austin, TX 78778
1-800-453-8140 (within Texas)
or 512-463-0834 / 512-463-7379 (fax)

UTAH
Bonding Services Coordinator
UT Dept of Workforce Services
140 East 300 South, Room 231
Salt Lake City, UT 84111
801-201-2931/ 801-526-9789 (fax)

VIRGIN ISLANDS
Bonding Services Coordinator
VI Dept of Labor
P.O. Box 302608
St. Thomas, USVI 00803
340-776-3700 ext 2055
340-714-4994 fax

VERMONT
Assistant Workforce Coordinator- VT Dept of Labor
P.O. Box 488

Green Mountain Drive
Montpelier, VT 05601
802-828-4348 / 802-828-4374 (fax)

VIRGINIA

Virginia does not participate in the Federal Bonding Program. Contact the One-Stop for assistance in finding employment. Refer the caller to their local One-Stop for general jobs and training assistance and to Ron Rubbin at 1-800-233-2258 ext. 246, or Roland Brack at 1-800-233-2258 ext. 271.

WASHINGTON

Bonding Services Co-Coordinator
Offender Employment Services
WA Dept of Employment Security
P.O. Box 9046
Olympia, WA 98507
360-407-5156 / 360-407-5218 (fax)

WEST VIRGINIA

Bonding Services Coordinator
WV Bureau of Employment Programs
POB 1349
1321 Plaza East
Charleston, WV 25305
304-558-0342 / 304-558-0349 (fax)

WISCONSIN

Bonding Services Coordinator
WI Dept of Workforce Development
201 E. Washington Avenue, Room G-200
P.O. Box 7972
Madison, WI 53707
608-267-1895 / 608-261-6956 fax

WYOMING

Bonding Services Coordinator - Dept of Workforce Services
851 Werner Court, Suite 120
Casper, WY 82601-1308
307-235-3611 / 307-235-3293 fax