

**SENIOR EMPLOYMENT
SCSEP/TITLE V PRE-APPLICATION FORM**

Today' Date _____

Inter-County Community Council

P.O. Box 189

Last Name _____

Oklee, MN 56742

1-218-796-5144

First Name _____ Middle Initial _____

Fax: 1-218-796-5175

Social Security Number _____ Telephone # _____

Address _____

County _____ State _____ Zip Code _____

Birth date _____ Age _____

Language spoken in your home _____ Example: English, Spanish, Etc.

Circle one: Citizen of the U..S A.
Permanent Resident Alien
Non Citizen with permit
Refugee

Race: White
Black
Hispanic
American Ind./Alaskan Native
Asian/Pacific Islander

Education:

Check one: (__ 8th-Under) (__ 9th-11th) (__ 12th) (__ 1-3yrs. College) (__ 4yrs College) (__ 4 or more)

Please list your last, paid job experience: _____

What are your hobbies and interests: _____

How did you hear about this program?

Newspaper _____ Friend _____ Radio _____ Flyer on bulletin board _____

Are you presently employed? Full-time _____ Part-time _____

Are you able to work up to 20 hour a week as far as you know? Yes _____ No _____

If no,
explain _____

Are you able to drive your own car to and from work? Yes _____ No _____

How far are you willing to drive to work? _____

Are you a veteran? _____

The information on this application is correct to the best of my knowledge. I understand my rights under the Minnesota Data Privacy Act and have received a copy of the Complaint Procedure.

Applicant signature _____

Title V/Senior Citizen Pre-Application

Total number of people in your household _____

Please check the source(s) of money for your household:

Self-employment for the family	_____	MFIB	_____
Alimony	_____	Food Stamps	_____
Insurance Annuities	_____	SSI	_____
Social Security Retirement	_____	General Asst.	_____
Worker's Compensation	_____	Veteran Benefits	_____
Rental Property Income	_____	Other Monthly Retirement Income	_____
Social Security Survivor's Income	_____		

For Inter-County Staff Use Only: Total Included Income _____

Start Date _____ Program _____

Work Site _____

Job Description _____

Supervisor _____

SCSEP Income Eligibility		
	District of Columbia (DC) 48 Contiguous States	
Family Size	Poverty Level	X 125%
1	\$11,770	\$14,713
2	\$15,930	\$19,913
3	\$20,090	\$25,113
4	\$24,250	\$30,313

*75% of Social Security Retirement benefit amount counts as income.