

Workforce Development

402 West First Street Duluth, Minnesota 55802

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Initial Application – Career Pathway Training

Name:		Phone number:			
Addre	ss:		Date of Birth:		
Email .	Address:				
Basic e	eligibility:				
1.	Are you 18 years or older? □ Yes □ No				
2.	Are you a US citizen or legally entitled to work in the	United States?	□ Yes □ No		
3.	Do you live in southern St. Louis County? ☐ Yes ☐] No			
If you	can answer yes to one or more of the following	questions, you <u>n</u>	nay be eligible for enrollmer	nt in	
Career	Pathway Training, funded through a DEED Path	ways to Prosper	ity (P2P) Grant:		
Are you currently receiving one of the following benefits:					
	a. MFIP or DWP	□Yes □No			
	b. SNAP (Food Support)	□Yes □No			
	c. Free or reduced lunch for a child in your hon	ne □Yes □No			
	d. SSI or SSDI benefits	□ Yes □ No			
2.	Have you been unemployed for at least 26 weeks in	the previous vear	(52 weeks)? □ Yes □ No)	
3.	Do you identify as an individual of color?	□Yes □No	(,-		
4.	Do you currently lack stable housing?	□Yes □No			
5.	Do you identify as an individual living with a disabilit				
6.	Do you identify as an individual with a criminal recor	•			
7.	Do you lack a high school diploma or GED?	□ Yes □ No			
8.	Does your household income fall below 200% of the		uidelines (see below)? ☐ Yes	s □ No	
	Number of people in household 200% Federal Poverty guidelines for 12 months				
	(excluding non-dependent roommates)		ross (pre-tax) income		
	1		\$25,760		
	2	\$34,840			
	3 4	\$43,920			
	5		\$53,000 \$62,080	_	
I certify	that the information provided is true to the best of my kno	owledge. I am also a		 ed is subject	
to revie immedi	w and verification and I may have to provide documents to ate termination if I am found ineligible after enrollment an tion for verification purposes in accordance with the "Use	support this application of support the su	ation. I am also aware that I am sud for perjury. I also allow release o	ubject to	
Applicant Signature:			Date:		
Grantee Staff Signature:			Date:		