



NORTHWEST PRIVATE INDUSTRY COUNCIL

“TENNESSEN” WARNING

AUTHORITY

The Northwest Private Industry Council (NWPIC), as the grantee of Federal and State job training funds authorized under Title I of the Workforce Investment Act, administers programs in Kittson, Marshall, Norman, Pennington, Polk, Red Lake and Roseau Counties designed to help unemployed or disadvantaged individuals secure jobs or training for jobs. As part of this responsibility as the recipient of WIA funds, the NWPIC has contracted with Inter-County Community Council (ICCC) and the Minnesota Department of Employment and Economic Development (DEED) for program services. As a result, ICCC and DEED are authorized to request information for applicants and to examine their qualifications to be participants in the WIA program.

PURPOSES AND USES

Under the Minnesota Government Data Practices Act (M.S. 15.1611 ct seq.), you have the right to know what uses will be made of private or confidential information you provide in filling out application documents for programs under Title I of the Workforce Investment Act (WIA). The information requested on the application is used to determine the qualifications and eligibility of applicants for participation in employment and training programs. The date of your application will be entered into an automated record keeping system. Staff members will have access to your application form in order to verify its contents. Certain items are public information and anyone may have access to public information upon request. Your authorization is required, however, for the release of private information. Private information is not accessible to anyone except you, persons you authorize to see it, certain State and Federal officials and private auditors under contract to the State or Federal Government whose jobs require reasonable access to it, and cooperating parties under contract to provide project services to the extent necessary to help implement your Individual service Strategy (ISS). Any information used for statistical or research purposes will be in summary form and will not disclose any personally identifying data about you. Depending on services recommended, your entire file will be transferred to the appropriate contractual agency.

EFFECTS OF NON-DISCLOSURE

The WIA application contains some questions whose answers we cannot require. Failure to complete these items will not adversely affect your eligibility, but omission of such items could mean that you might not receive full consideration for participation. You are encouraged to complete all the items in order to facilitate a complete appraisal by staff. Intentional misrepresentation of information about income or prior employment will result in termination from enrollment in any WIA program and may result in criminal prosecution.

AUTHORIZATION

I authorize ICCC and/or DEED to share information in order to determine eligibility and to the extent necessary to help implement the ISS. I understand that this authorization will expire one year from the date of signature on this form or upon the completion of all follow-up requirements of my participation in the program.

Applicant Signature _____	Date _____
Parent/Guardian Signature _____	Date _____
Service Provider Signature _____	Date _____