

Pre-Screening Notice and Certification Request For The Hiring Incentive Training Grant Program

JOB APPLICANT: Please fill in the lines below and check any boxes that apply

AT LIGART. Floade in it are block and block any boxes that apply.			
Your Name:			
Social Security Number:			
Street address where you live:			
City or town, state, and ZIP code:			
Telephone number: () - Date	Date of Birth:		
Check all that apply: I am currently a Massachusetts resident. I have been unemployed for the past 6 months or longer. * I have not been previously employed by this company. I am a Veteran (Please provide a copy of your DD214) *Veteran's preference — The 6 month or longer unemployment requirement will be waived for qualified veterans By filling out and signing this form, you are: Giving the Department of Unemployment Assistance and the Department of Career Services authorization to confirm this information with your prospective employer. Should this employer hire you, and you meet the Hiring Incentive Training Grant program criteria, this employer may be able to receive a flat fee of \$2,000 in grant funds to assist paying for costs associated with training you for your new position within this company.			
I have read and understand the information above. I declare that to the best of my knowledge, this information is accurate and complete.			
Job applicant's signature:		Date:	
EMPLOYER: Please provide the following information.			
Employer name:	FEIN number:		
Street address:			
City or Town, State, ZIP Code:			
If you have submitted an online HITG grant application including this individual, please provide application number:			
Person to Contact:	Contact Number:	Contact Number:	
I confirm that the above-referenced individual has applied for employment with our company. I am submitting this information for the sole purpose of verifying whether or not hiring this individual would qualify our company for a hiring incentive training grant.			
Employer signature and title:		Date:	
This form must be submitted at the same time as your application for grant funds within 30 days of the Job Applicant's			

hire. Please fax this to the attention of the Hiring Incentive Training Grant Program at 617-723-5594. Call 800-252-1591 with any questions.

