



Participant Eligibility Worksheet

Purpose: This worksheet serves as documentation of a participant's eligibility and employment status on the date of application. All participants are required to print and sign this document.

Grant Eligibility:

Directions: Check the box if the statement is true.

I am at least 17 years old, not currently enrolled in high school, and have not been enrolled in another H1-B grant program in the last 90 days.

Employment Status:

Directions: Check the box that best describes your employment status. Check only one box.

I am unemployed.

I am employed only with part time employment.

I am employed, but employment does not commensurate with the level of education, skills, or wage.

I am employed but is currently earning less salary than previously earned.

I am employed, but have obtained only episodic, short-term employment.

I am an incumbent worker referred through my employer. If yes, who is your employer:

None of the above employment status options pertain to me.

In 1-2 sentences, describe why you selected the employment status.

I hereby attest that my response and the information provided on this form are true, complete, and accurate.

Print Name: _____

Signature: _____ Date: _____

For questions or assistance, contact RapidIT@mccneb.edu or 531-622-6220.