

GRANT-BASED ON-THE-JOB TRAINING PARTICIPATION: VOLUNTARY CONSENT FORM

PARTICIPANT NAME	
CASE NAME	
CASE NUMBER	I.D. NUMBER
WELFARE TO WORK WORKER NAME	

This form is to help you decide if you want to volunteer to do grant-based on-the-job training (OJT). It lists your rights and responsibilities if you accept the OJT assignment. Grant-based OJT is where all or part of your cash aid, or the savings from your lowered aid because you are working, will be given to your employer. The employer will use your aid (or the savings) to help pay for your wages. If you do not want to do grant-based OJT, you and your worker will decide what your Welfare-to-Work assignment will be based on your background and employment plan.

GRANT-BASED ON-THE-JOB TRAINING (OJT) PARTICIPATION REQUIREMENTS

My initials below show that I have reviewed the following items with my worker and understand the rules for participation in a grant-based OJT funded assignment.

- Participation in a grant-based OJT assignment is voluntary.
- The county welfare department (CWD) cannot take any action against me for refusing to agree to be assigned to a grant-based OJT position.
- The CWD will give all or part of my cash aid to my employer to pay all or part of my wages.
- I will not receive the earned income disregard for wages that are paid from the cash aid given to my employer.
- When I participate in a grant-based OJT assignment, my total monthly take-home pay may be less than the amount I would usually get as cash aid.
- The amount of my cash grant will be based on the expected earnings from my grant-based OJT assignment.
- The monthly total of my **gross wages** (the amount I am paid before taxes and other payments are taken out) plus my cash aid, if any, should be as much as or more than the amount I would get as cash aid if I did not take the grant-based OJT position.
- If the county pays me a corrective underpayment because my employer does not pay me for all the hours that I work, and I later collect the wages due from the employer, I will pay the county back for as much of the corrective underpayment as I receive in back wages from the employer. If I do not return the money the county will consider this an overpayment.
- If I agree to a grant-based OJT assignment, I am still a CalWORKs recipient. I must comply with Welfare-to-Work requirements.
- Failure to meet the rules of the grant-based OJT assignment without a good reason will result in a sanction and my cash aid may be lowered. Some reasons why I may be sanctioned and have my cash aid stopped or lowered are: failing to meet the work rules, failing to show up for work, tardiness, failing to follow procedures, failing to make satisfactory progress in my job, etc.
- If I do not meet the assignment rules, I have the right to give a good reason for not participating so I do not get sanctioned and have my cash aid lowered. The following are some good reasons for not meeting my participation rules or completing my assignment:
 - Lack of supportive services (such as childcare, transportation, tools, clothing required for the job, books, and other necessary job related costs).
 - Past or current victim of domestic abuse (such as physical, sexual, or psychological abuse).
 - The daily or weekly hours of work are more than the hours in my assignment agreement.
 - Acceptance of a full-time unsubsidized job.
 - The Welfare-to-Work Handbook that is part of my Welfare-to-Work Plan gives more information on reasons for not participating in my grant-based OJT assignment.
- I can file for a state hearing if I do not agree with any CWD action.

GRANT-BASED ON-THE-JOB TRAINING ASSIGNMENT

EMPLOYER'S NAME:

EMPLOYER'S ADDRESS:

SUPERVISOR'S NAME

SUPERVISOR'S PHONE NUMBER

LENGTH OF ASSIGNMENT:

DAILY WORK HOURS:

TOTAL HOURS OF WORK ASSIGNED PER WEEK:

HOURLY STARTING WAGE:

From _____ to _____

From _____ to _____

Amount that the CWD will pay to my employer: \$_____. The CWD will subtract this money from my grant, or if my grant is not enough, from the grant savings to the CWD caused by my wages.

I agree to tell my Welfare-to-Work worker of any changes to my work schedule as soon as possible, but no later than five (5) days after the change.

I understand that the employer will provide the following benefits:

- | | |
|---|--|
| <input type="checkbox"/> None | <input type="checkbox"/> Paid Holidays |
| <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Dental Insurance Coverage |
| <input type="checkbox"/> Sick Leave | <input type="checkbox"/> Vacation |
| <input type="checkbox"/> Others _____ | |

CERTIFICATION

I understand the purpose of the grant-based OJT assignment is to give me work skills and help me find a job. I have read this form and its contents have been explained to me. I know that I must meet all my responsibilities as a Welfare-to-Work participant. I understand that I can ask my Welfare-to-Work worker if I have any questions.

I understand that I must tell my Welfare-to-Work worker right away of changes in my need for Welfare-to-Work supportive services or if I no longer need them. If I do not report the changes in advance, Welfare-to-Work may not be able to pay for them. I understand that if Welfare-to-Work pays for supportive services that are more than what I need to participate in Welfare-to-Work, I will have to pay Welfare-to-Work back.

I understand that if this is my first Welfare-to-Work activity and I want to ask for a change or be assigned to another activity, I have 30 days from the beginning date of my first activity to contact my worker.

If this is not my first activity, I understand that if I want to ask for changes to my Welfare-to-Work Plan, I have three (3) working days after my plan was completed or my plan was changed to contact my worker.

I do not wish to participate in a grant-based OJT assignment at this time.

PARTICIPANT'S SIGNATURE

DATE

I want to volunteer for a grant-based OJT assignment. I have read (*or had read to me*) and understand the information provided above and have received a signed copy of this form.

PARTICIPANT'S SIGNATURE

DATE

WELFARE TO WORK WORKER'S SIGNATURE

PHONE

DATE

You have the right to ask for a state hearing if you disagree with any of the decisions made by the county about participating in Welfare-to-Work.