



SAUNDERS STAFFING

INCORPORATED

Our company participates in the Work Opportunity Tax Credit Program. Your responses to the following questions will be confidential and used only to assist us in complying with the requirements of this program. Your answers will not affect your employment or any benefits you may be receiving.

Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____

Zip: _____ Phone: _____ SSN: _____

Job Title: _____ Pay Rate: _____ Hire Date: _____

Please read each statement below and check YES to any statement that applies to you:

#	Question	Yes	No
1	Have you worked for this employer before?	<input type="checkbox"/>	<input type="checkbox"/>
2	Have you, or any immediate member of your family, EVER received Temporary Assistance to Needy Families (TANF, Welfare)?	<input type="checkbox"/>	<input type="checkbox"/>
3	Have you, or a member of your family, received Supplemental Nutrition Assistance Program (SNAP) benefits (FOOD STAMPS) ANYTIME over the last 6 months?	<input type="checkbox"/>	<input type="checkbox"/>
4	Have you been UNEMPLOYED the last 6 months and at ANYTIME received unemployment compensation?	<input type="checkbox"/>	<input type="checkbox"/>
5	I personally received Supplemental Security Income (SSI) or (SSDI) Supplemental Security Disability Income anytime during the last 2 months.	<input type="checkbox"/>	<input type="checkbox"/>
6	I participated in a rehab program approved by the state, the Ticket to Work program, or the Department of Veterans Affairs.	<input type="checkbox"/>	<input type="checkbox"/>
7	I am a Veteran of the United States Armed Forces.	<input type="checkbox"/>	<input type="checkbox"/>
8	I am a Veteran who received Supplemental Nutrition Assistance Program (SNAP) benefits (FOOD STAMPS) ANYTIME over the last 6 months.	<input type="checkbox"/>	<input type="checkbox"/>
9	I am a Veteran who was unemployed for more than 4 weeks, but less than 6 months, during the past year.	<input type="checkbox"/>	<input type="checkbox"/>
10	I am a Veteran who was unemployed for more than 6 months during the past year.	<input type="checkbox"/>	<input type="checkbox"/>
11	I am a Veteran discharged from active duty within the last 12 months and entitled to compensation for a service connected disability.	<input type="checkbox"/>	<input type="checkbox"/>
12	I am a Veteran receiving compensation for a service connected disability who was unemployed for at least 6 months during the last 12 months.	<input type="checkbox"/>	<input type="checkbox"/>
13	During the last 12 months , I was convicted of a felony or released from prison for a felony.	<input type="checkbox"/>	<input type="checkbox"/>

Under penalties of perjury, I declare the above information is, to the best of my knowledge, true, correct, and complete. I agree that I am voluntarily providing the information on this form and it is not a condition of employment my signature authorizes release of information to the appropriate government agency, such as Motor Vehicles, Unemployment Insurance or Veterans, to verify my eligibility under WOTC. Our company utilizes a third party named Tax Credit Management Group, LLC located in Dubuque, Iowa to process this form required for the WOTC program. By signing below, you agree to allow Tax Credit Management Group, LLC to process your WOTC form on behalf of our company.

Signature: _____

Date: _____

Printed Name: _____