



## Report Employment

### Section I. Participant Details

Name:	
Address:	City/State/Zip:
Email:	Phone:
What was the approximate start date of your Takoda program?	Name of your Takoda career counselor:
Have you found employment since program completion?	

**If you have found employment, proceed to Section II. If not, proceed to Section III.**

### Section II. Employment Details

Employer:	Job Title:
Employer Address:	
Supervisor Name	Supervisor Email and Phone:
Briefly describe your job responsibilities:	
Employment Start Date:	Average Hours Worked Each Week:
Hourly Wage or Annual Salary:	How often do you receive a paycheck?
Do you receive benefits?	Are you willing to share your career journey story with potential participants and philanthropic partners of Takoda? If so, a team member will follow-up by phone or email.

### Section III. Certifications

- I certify this information is true and accurate to the best of my knowledge.
- I grant Takoda at American Indian OIC permission to use the information provided for their reporting purposes.
- If I am working, I understand my employer will be contacted to verify the information I have provided.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_