

# Application for Employment Retention Incentive (ERI)

Ohio Department of Job and Family Services



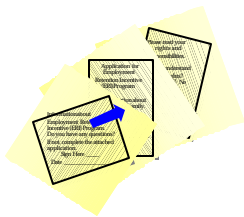
## What is the Employment Retention Incentive Program?

Starting August 2006

If you have a job and your family's Ohio Works First (OWF) case was closed, you may be eligible to get additional payments under a new program called the Employment Retention Incentive (ERI) Program.

The goal of the program is to help families keep their jobs and possibly get a better one.

### How do I get the ERI incentive payments?



#### You will need to:

1. Complete this application.
2. Have been a member of an OWF case in which someone was working when the OWF case was closed.
3. Be working an average of 25 hours a week **or** be making \$128.75 a week (before taxes) at the time you apply for ERI.
4. Be able to prove you are working.
5. Keep your address updated with the CDJFS.

### When can I apply for the ERI incentive payment?



#### You may apply:

1. Before your family's OWF case is closed; or
2. No later than two months after your family's OWF case was closed.

**EXAMPLE:** If your OWF has been closed July 31, 2006 you must apply by September 30, 2006.

### How much can I get?



#### You may be able to get as much as \$1000 over nine months.

- 1<sup>st</sup> payment: \$200** when your application is approved.
- 2<sup>nd</sup> payment: \$200** if you have a job in the 2<sup>nd</sup> month after you apply.
- 3<sup>rd</sup> payment: \$200.00** if you have a job in the 5<sup>th</sup> month after you apply.
- 4<sup>th</sup> payment: \$400.00** if you have a job in the 8<sup>th</sup> month after you apply.

### Where do I turn in this application?



**Turn in this application to your local County Department of Job and Family Services (CDJFS) office.** You may be eligible for additional assistance through food stamps, the Prevention Retention and Contingency (PRC) program, Medicaid or daycare programs.

### Information regarding your social security number.

Generally, if you are applying for ERI benefits, you must provide your social security number. Social security numbers may be used when contacting appropriate persons or agencies to determine your eligibility and verify information you have given. Your social security number may be used for a felony warrant match; a match of persons in violation of probation or parole by law enforcement agencies; or for the purposes of investigations, prosecutions, and criminal or civil proceedings that are within the scope of law enforcement agencies official duties.

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## 1. Tell us about you (the applicant)

First Name, Middle Initial, Last Name	Social Security Number ____ - ____ - ____
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## 2. Tell us how to reach you

Street Address

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City	State	Zip Code	Phone Number ( )
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## 3. Tell us about your employment

List all employment that you currently have. You may be asked to verify your employment.

1. Employer Name	Begin Date	Weekly Wages	Weekly Hours
2. Employer Name	Begin Date	Weekly Wages	Weekly Hours
3. Employer Name	Begin Date	Weekly Wages	Weekly Hours
4. Employer Name	Begin Date	Weekly Wages	Weekly Hours

## 4. Signature of person who completed this application

### By signing this application:

- I understand the questions on this application and certify, under penalty of perjury, that all my answers are correct and complete to the best of my knowledge. I agree to provide documents to prove what I have said.
- I agree that the CDJFS may contact other persons or organizations to obtain the necessary proof of my eligibility.

<b>Signature of Applicant:</b>	<b>Date:</b>
<b>OFFICE USE ONLY: Case #:</b> _____	<b>Date Received:</b> _____

## Your civil rights

Federal law and the policies of the U.S. Department of Health and Human Services (HHS), the Ohio Department of Job and Family Services (ODJFS) and the local County Department of Job & Family Services (CDJFS) say that we must not discriminate on the basis of race, color, national origin, sex, age, or disability.

**To file a discrimination complaint, write or call HHS or ODJFS.**

<b>HHS</b> Region V, Office of Civil Rights 233 N. Michigan Ave., Suite 240 Chicago, Illinois 60601 (312) 886-2359 and (312) 353-5693(TDD) fax (312) 886-1807	<b>ODJFS</b> Bureau of Civil Rights 150 E. Gay Street, 18 <sup>th</sup> Floor Columbus, OH 43215 (614) 644-2703 (voice) or 1-866-227-6353 (toll free) (614) 752-6381 (fax), 1-866-221-6700 (TTY)	HHS and ODJFS are equal opportunity providers and employers.
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