

Signature

Lac Courte Oreilles Tribal Government

PROOF OF WORK SEARCH

Name: First, Middle, Last, Suffix (e.g. "Jr.", "Sr.", "III")			Week Beginning Dat	Week Beginning Date (Sunday):	
 You must contact three (3) employers each week at a minimum. You must keep a list of each person you talked with by filling in the information below. If you're unable to work you must provide documentation in order to be exempt from the work search. Each contact on the list will be verified. Submit complted form to LCO Tribal Office, c/o Admin Assistant, 13394 W Trepania Rd, Hayward, WI 54843 I certify that I've provided appropriate documentation and I am exempted from the weekly work search. 					
DATE OF SEARCH	BUSINESS or EMPLOYER & POSITION APPLIED FOR	TYPE OF CONTACT (In person, by phone, online, etc.)	CONTACT INFO (Name of person contacted, Phone #, website, email, etc.)	RESULT OF CONTACT (Interview/Hire Date, Unsuccessful, etc.)	
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Date Signed