

# **ENERGY AUDITOR LEVEL II TRAINING APPLICATION PACKAGE**

This Energy Auditor Level II Application packet includes:

1. Frequently Asked Questions (2 pages)
2. Application (2 pages)
3. Energy Audit Level II Brochure (2 pages)

## **Frequently Asked Questions**

### **What is the application process?**

1. Submit the application with all supporting documents.
2. Application will be assessed and screened for eligibility.
3. A phone interview will be conducted with eligible applicants.
4. Upon successfully completing the phone interview, the prospective student will be required to take and submit a drug test.
5. Final acceptance is determined upon eligibility and receipt of the drug test results.

### **Who is eligible?**

- Native American individuals and Alaskan Natives who are enrolled Tribal Members in a Federally Recognized Tribe.

### **Where is the training?**

- Training will be conducted on the United Tribes Technical College campus in Bismarck, North Dakota.

### **If I am accepted into the program, what costs will I be responsible for?**

- Accepted students are responsible for their own drug testing.
- Accepted students are responsible for transportation to and from Bismarck, North Dakota.

### **What costs are covered by the program if I am accepted?**

- Tuition and materials for the training.
- Lodging and meals.
- Transportation from the lodging to the college campus.

### **Are there resources that will help me pay for transportation to Bismarck, North Dakota to attend the training? Are there resources to help me pay for the drug testing?**

- Accepted students are encouraged to seek assistance from the offices that provide supportive services at their local Tribal Government. Each office has eligibility criteria and an application process. Supportive services may include transportation costs, training start-up support, and drug testing costs. In many cases, supportive services can be provided by offices such as:
  - Tribal Employment and Training Office (also known as WIA Office, Workforce Development Office, or 477 Office)
  - BIA General Assistance program
  - TERO programs

### **Why do I need a case manager?**

- Accepted students are encouraged to participate with a case manager during training to ensure a successful outcome.

### **What is an Individual Plan for Success?**

- An Individual Plan for Success is a plan that outlines students' responsibilities and program responsibilities. It is signed to acknowledge an agreement between the case manager, the program staff, and the student.

### **Class Schedule**

- Classroom hours will be Monday-Friday 8-5, and Saturdays 8-12:00 Noon

### **What type of education will I have to have to be accepted into the program?**

- Students must have a High School diploma or a GED.

### **Will there be an entrance exam that I will need to take to get into the program?**

- No. However, an assessment will be issued prior to attending class, and an additional assessment may be provided upon arrival at the college.

### **Why do I have to submit a driving record?**

- Driving Records must be provided because they are an essential component for employment as an Energy Auditor.

### **Will I have a roommate?**

- Yes

### **Personal Vehicles/Transportation**

- You may bring your own vehicle to the training; however, it is not necessary as transportation will be provided.

### **How do I submit my application and supporting documents?**

Submit **Completed** application to:

Barbara Schmitt, 701-530-0607 (fax)

or

mail to:

UTTC, Attn: Barbara Schmitt, 3315 University Drive, Bismarck, ND 58504

### **Additional questions?**

Contact: Barbara Schmitt, Economic Development Director (701) 255-3285 Ext. 1436  
[bschmitt@uttc.edu](mailto:bschmitt@uttc.edu)

Arden Boxer, Administrative Assistant, (701) 255-3285 Ext. 1435 [aboxer@uttc.edu](mailto:aboxer@uttc.edu)

United Tribes Technical College  
3315 University Drive  
Bismarck, ND 58504

Division of Workforce Development  
Public Law 102-477  
Energy Auditor Level II Application

Full Name \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Circle one: Female Male Phone No.: \_\_\_\_\_ Message #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_ CIB# \_\_\_\_\_ Degree of Indian Blood \_\_\_\_\_

Marital Status Single Married Separated Divorced Widowed

Do you have a **Current** Driver's License? Yes No

Emergency Contact Information:

① Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

② Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Education Completed: Circle highest level completed.

High School 9 10 11 12 GED What year completed: \_\_\_\_\_

College/University 1 2 3 4 4+ Degree: \_\_\_\_\_

Voc./Tech. School Type of Training: \_\_\_\_\_

Other Training (describe): \_\_\_\_\_

Are you currently employed? Yes No

Are you currently receiving unemployment benefits? Yes No If yes, # of weeks on unemployment: \_\_\_\_\_

Are you willing to relocate for employment? Yes No

Have you ever been convicted of a felony? Yes No

Do you have any pending legal issues? Yes No  
Tickets, Warrants, etc., these will be verified.

If yes, please explain pending legal issues:  
\_\_\_\_\_  
\_\_\_\_\_

List medical conditions (if applicable): \_\_\_\_\_  
\_\_\_\_\_

Do you currently wear corrective lenses? Yes No Do you need corrective lenses? Yes No

**Circle all that apply to you:**

Single head of household	Temporary housing/homeless	Unstable housing arrangements	BIA General Assistance
Learning Disability	Disabled	Parole/Probation	TANF Recipient
Lack of Transportation	Lack of significant work history	Convicted of a crime	Receiving SSI
Alcohol/substance abuse	Underemployed/Low income	Previously incarcerated	Criminal record

Division of Workforce Development  
Public Law 102-477  
Energy Auditor Level II Application

Employment History (Please list the last 3 employers)

① Company: \_\_\_\_\_ Phone No: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Job Title: \_\_\_\_\_ Hrly Wage: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

② Company: \_\_\_\_\_ Phone No: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Job Title: \_\_\_\_\_ Hrly Wage: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

③ Company: \_\_\_\_\_ Phone No: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Job Title: \_\_\_\_\_ Hrly Wage: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Referred by:**

Program: \_\_\_\_\_ Address: \_\_\_\_\_  
P.O. Box/Street City State/Zip

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone #: \_\_\_\_\_

Certification of Applicant:

I certify that the information provided is true to the best of my knowledge. I am aware that the information provided is subject to review and verification and that I may have to provide additional information. I authorize the Division of Workforce Development to share this information with partners participating in project for the purpose of assisting me in obtaining assistance, training, education, and/or employment.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Please submit the following supporting documents:

- CIB – Certificate of Indian Blood
- Copy of Social Security Card
- Copy of Drivers License
- Referral letter (highly recommended)
- Motor Vehicle Driving Record