

Employer/Company Requirements:

- Ensure the applicant meets the State guidelines for the ND Career Builders Program
- Confirm the position is located in Walsh County
- Ensure timely payment of the agreed upon private donation to the ND Career Builders (through the Walsh County Career Builders Program) by the last day of each quarter
- Require the applicant to commit to a 3-year work agreement
- Provide an accurate and current job description for the applicant
- This is not intended to subsidize wages
- Employer/Company is current on all Walsh County Property Taxes

Applicant Requirements:

- Agree to work in Walsh County for 3 years and reside in North Dakota during the 3-year period
- Meet all rules and requirements for the ND Career Builders Program
- Enroll in a designated ND college and maintain the required GPA
- Repay scholarship dollars if the terms of agreement aren't met
- Sign a legally binding *Scholarship Award Agreement*
- Be accepted into a program at the associate's level or below, or other program up to and including a bachelors level that is not longer than 4 semesters or 6 quarters and is on the high-need and emerging occupations list
- If not yet accepted into a qualifying program, provide anticipated acceptance date
- Scholarship amount will not exceed cost of attendance for program of study after other scholarships and grants are applied. The total amount may not exceed \$17,000.

Example of Total for One Recipient

	NDUS Amount	WCCB Amount	Employer Amount	TOTAL
Semester 1	\$2,125.00	\$1,062.50	\$1,062.50	\$4,250
Semester 2	\$2,125.00	\$1,062.50	\$1,062.50	\$4,250
Semester 3	\$2,125.00	\$1,062.50	\$1,062.50	\$4,250
Semester 4	\$2,125.00	\$1,062.50	\$1,062.50	\$4,250
TOTAL	\$8,500	\$4,250	\$4,250	\$17,000

For more information, questions, or concerns contact Stacie Sevigny, Executive Director of Walsh County JDA, (701) 352-3550 or Stacie@redriverrc.com

Employer/Company Information

Employer/Company: _____

Representative Name/Title: _____

Representative Email: _____ Phone: _____

Address: _____

City, State: _____ Zip: _____

Representative Signature: _____

Date Signed: _____

Applicant Information

Applicant Name: _____

Future Job Title: _____

Name of Institution/Provider of qualifying degree/certification: _____

Date accepted into High-Need/Emerging Occupation program/certification: _____

If not yet accepted, expected acceptance date: _____

Anticipated Salary (optional): _____ (Annual/ Monthly) DOB: _____

Applicant Email: _____ Phone: _____

Address: _____

City, State: _____ Zip: _____

Applicant Signature: _____

Date Signed: _____

*** ATTACH ACCURATE JOB DESCRIPTION FROM EMPLOYER ***

Actual amount of funds applicant is eligible for is contingent on the availability of funds in Walsh County program; \$17,000 max is not guaranteed