

WIOA Orientation and Customer Rights

Signature Page



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ORIENTATION COMPLETED AND INCLUDED THE FOLLOWING TOPICS:

(Please initial in the boxes provided as items are reviewed with Career Advisor)

	1. NCWorks/WIOA Services		6. Drug Free
	2. Customer Responsibilities		7. Hatch Act
	3. Follow-Up		8. Your Employment Rights
	4. Informed Consent Photo Release: Yes _____ No _____		9. Your Civil Rights
	5. General Liability Medical Attention: Yes _____ No _____		10. Your Grievance Rights

The above information has been explained to me, and I have received a copy and hereby acknowledge my participation and assume responsibility for all risks and indemnify and hold harmless the High Country Council of Governments and High Country Workforce Development Board, its trustees, officers, employees, and Goodwill Industries of Northwest North Carolina (including the staff and volunteers) from any liability arising directly or indirectly from participating in the program.

Customer Signature: _____ Date: _____

Parent Signature: _____ Date: _____
(for participants under 18 years of age)

Staff Signature: _____ Date: _____

Rudy Allen, SHRM CP
VP, Human Resources and Organizational Development
Goodwill Industries of NWNC, Inc.
2701 University Parkway
PO Box 4299
Winston-Salem, NC 27105
336-714-3027 Office
rallen@goodwillnwnnc.org

This form must be scanned in to NCWorks.

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