



Waganakising Odawak
Little Traverse Bay Bands of Odawa Indians
Niigaandiwin Education Department
7500 Odawa Circle, Harbor Springs, Michigan 49740
{Telephone} 231-242-1488 {Fax} 231-242-1490
{Email} Aanjigin@ltbbodawa-nsn.gov



Participant Agreement Form

The Little Traverse Bay Bands of Odawa Indians (LTBB) Aanjigin Honorarium Program assists LTBB tribally enrolled citizens in becoming more competitive in the workforce and promote economic and social development of our tribal community. Professional behaviors are a large part of being able to successfully obtain gainful employment. Therefore, we expect participants to show professional behavior while participating in the program; however, we have some specific guidelines to help clarify our expectations. As a participant in this program, I agree to the following;

- I agree to fully participate in this program and follow through on all steps on my approved Individualized Employment Plan to the best of my ability.
- I agree to notify the Aanjigin Staff if I cannot follow through on any part of my approved Individualized Employment Plan, and I will work with the Aanjigin Staff to modify the plan if needed.
- I understand that I am responsible for any outstanding balance that is not covered by the Aanjigin program. If I were to withdraw from a training, outlined in my IEP, and there are outstanding fee's, I understand that Aanjigin will rescind its financial assistance and I will be responsible for any and all early withdrawal from a training program.
- I agree to successfully and professionally interact with the Aanjigin Program, LTBB Niigaandiwin Education Department staff, our program partners, and potential employers. This includes prompt follow – up and response to call, texts, or emails from staff, attending all scheduled appointments on time, and providing notification if I will be late or I need to reschedule an appointment; and professionally engaging in discussions about the program and my participation.
- I agree to use any items purchased for me as part of supportive services for their intended purpose(s) under my Individualized Employment Plan.
- I agree to follow the proper policies and procedures if I have a grievance as laid out by the Niigaandiwin Education Program Grievance Policy.
- I also agree that upon completing my goals in the Aanjigin program, or if I prematurely decide to end it, I will commit to writing a statement about my overall experiences in the Aanjigin program, including: constructive criticism (what worked, what didn't work), what could be changed to meet the needs of citizens better, and how has the assistance you received helped change your future opportunities.

AANJIGIN PROGRAM PARTICIPANT

DATE

AANJIGIN PROGRAM STAFF

DATE

LTBB NIIGAANDIWIN EDUCATION DIRECTOR

DATE