



**State of Alaska**  
**Department of Health and Social Services**  
**Division of Public Assistance**  
**Business Work Experience (BWE) Site Agreement**

DPA Office:	Business Name:		
DPA Office Address:	Business Address:		
City:                      State:              Zip:	City:                      State:              Zip:		
Phone:                      Fax:	Phone:                      Fax:		
<p><b>NOTE:</b> This agreement permits the Division of Public Assistance (DPA), or its agent, to place an Alaska Temporary Assistance Program participant at the Business Experience Work Site named above, to perform tasks that develop job skills and work habits. To execute this agreement, DPA and the Business Experience Work Site named above agree to the following:</p>			
<b>Business Work Experience Terms and Conditions</b>			
<p>DPA, or its agent, agree to:</p> <ul style="list-style-type: none"> <li>• Screen participants to assess their skills and suitability to perform tasks at the work site.</li> <li>• Contact the work site supervisor to arrange placement of participants.</li> <li>• Assist the work site supervisor to resolve problems that may occur during a participant’s placement.</li> <li>• Assume responsibility for the cost of treatment (up to a limit of \$25,000) of accidental injuries suffered by a participant at the work site, if the work site does not already provide such coverage.</li> </ul>			
<p>The Business Experience Work Site agrees to:</p> <ul style="list-style-type: none"> <li>• Identify the tasks assigned to participants.</li> <li>• Provide on-going supervision of participants.</li> <li>• Orient and train participants to perform assigned tasks.</li> <li>• Report a participants’ attendance monthly to DPA.</li> <li>• Notify DPA, or its agent, within 24 hours if participants sustain an injury at the work site.</li> <li>• Notify DPA, or its agent, within 24 hours if participants do not perform assigned tasks, duties, or responsibilities as directed.</li> <li>• Notify DPA, or its agent, within 24 hours if participants fail to appear at the work site on two consecutive days, without reasonable explanation.</li> </ul>			
<p><b>CERTIFICATION STATEMENT:</b></p> <p>We agree that Alaska Temporary Assistance Business Work Experience participants must not displace any currently employed worker or position, including partial displacement by a reduction in hours of overtime, wages, or benefits. Placements made under this agreement must not prevent an employee in layoff status from filling a similar vacant position, or fill a position created by a layoff or a reduction in force. The parties also agree to abide by the attached Special Provisions.</p>			
_____	_____	_____	_____
BWE Site Representative	Date	Caseworker (DPA or its agent)	Date