



Oyate Connections
PL 102-477 Employment and Training Programs
P.O. Box 590
Eagle Butte, SD 57625
Phone: (605) 964-6415, 4233, 2909
Fax: (605) 964-6416



"We do this so that our people will live..."

April 24, 2023

CRST Tribal Programs;

RE: SUMMER YOUTH REQUESTS

Greetings! Oyate Connections is excited to announce that the 2023 Supplemental Youth Services (Summer Youth) project will begin its first session; June 12-July 7, and the second session; July 10-August 4.

If you are interested in supporting our youth's employment endeavors with a worksite and training, please return the attached work request to our office via fax: (605) 964-6416, or email: daltonjoliver@gmail.com or janellehollowhorn@gmail.com.

Projects may include, but not limited to; painting outdoors/indoors, lawnmowing, janitorial service, garbage collecting, clearing brush, answering phones, filing, copying, etc. We ask that programs please keep tasks safe for youth and also, offer detailed instruction of training; how, when, where, why, etc., since participants will be required to record their daily duties in preparation for their future resume or job application process.

Worksites are selected according to a participant's interest, therefore, not all programs may be selected, or may be selected in one month, but not the other. Oyate Connections does ask a participant to commit one month to their selected worksite.

Attached, you will find a Worksite Request form needed for preparation.

If you should have any questions, or comments you would like to share, please contact our office for clarification or discussion. We hope to hear from you soon and look forward to working with you!

Thank you!


Arlen Lee, Director



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**SUPPLEMENTAL ** YOUTH ** SERVICES ** PROJECTS (Summer Youth)
 Request Form**

 Name of tribal program / business Date

 PO Box City State Zip Code

If available, please attach a job description for training purposes: *(temporary / unofficial)*

Number of youth requested per session:

First Session: _____ Second Session: _____

Title of position(s) requested: _____

List of skill(s) and duties that youth will attain:

Any preferred education or experience required for potential On-The-Job training? Yes () No ()

If yes, please list: _____

 Print supervisor name Signature Phone#