## Missouri's National Career Readiness Certificate Employer Partnership Letter

ACT WorkKeys <sup>®</sup> Assessment as the credential to doo	his form, your business comr System and the National Ca cument essential work-relate ming a Certified Work Ready	areer Readiness Certifed skills in support of the	icate™ (NCRC)
	online at: <u>http://workreadycor</u>	-	s <mark>s/form</mark> )
Employer Support:			
We agree to recognize the va or request the NCRC when hi		•	and will accept and/
We give permission to use ou to promote the NCRC.	r organization's name and lo	go in public awareness	efforts
Employer Information: (All infor	mation required)		
Business Name			
Contact Name			
Contact Title			
Contact Phone Number			
Contact Email Address			
Contact Website (if applicable)			
Address			
City	County	State	Zip
Number of Employees **	Industry		
Employer Signature		Date	
	Please send this letter VRC Director, Division of Workforce 421 E. Dunklin Street, Jefferson City	Development	
F	Fax: (573) 751-8162 • Email: cwrc@	@ded.mo.gov	
	Wissouri WORKREADY communities		
	www.NationalCareerReadii Career Readiness Certificate logo is a regist Please refer to the NCRC <i>Employer Handbo</i> **Number of Employees	tered trademark of ACT, Inc.	
emplo	issouri Division of Workforce Development is an equal oyer/program. Auxiliary aids and services are available Is with disabilities. Missouri TTY Users can call (800) 73	e upon request to	
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