**Jobs for Life Student Information**

Please note that your responses to any and all of the following questions WILL NOT disqualify you from participating in Jobs for Life. JfL Leaders will keep all personal information disclosed on this form confidential.

**GENERAL INFORMATION**

Name: Gender (circle one) Male Female

Address:

City: State: Zip Code:

Phone: Email:

Date of Birth: What church do you attend, if any?

Have you ever served in the US Military? Yes No

**JOBS FOR LIFE TRAINING INFORMATION**

What is your reason for taking Jobs for Life training? \_\_\_\_\_\_

What is your present job/career goal or objective? \_\_\_\_\_\_\_\_\_\_\_\_\_

What sort of position(s) are you looking for?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you need assistance finding transportation for the class? Yes No

Are you willing to help others with transportation for the class? Yes No

**Check all that apply:**

Unemployed Part-time job Self Employed Retired

If employed, name of employer Industry

Current hourly wage (optional)

Are you a current recipient of government assistance? Yes No

Current Marital / Family / Housing Status:

Married Single Divorced Separated Widowed \_\_

Do you have children? Yes No If so, how many?

Housing arrangements: Rent Own Homeless Other

If other, please explain:

**The following questions will help us to personalize the class to your interests, skills and needs.**

Check any training or classes that may benefit you:

\_\_\_ Adult Literacy \_\_\_ Recovery from Addiction

\_\_\_ GED \_\_\_ Anger Management

\_\_\_ Computer Skills \_\_\_ Parenting

\_\_\_ Abuse Recovery \_\_\_ Conflict Resolution

\_\_\_ Financial Stability \_\_\_ Family Counseling

\_\_\_ Health and Wellness Other:­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How comfortable are you with a computer? \_\_\_\_ Very \_\_\_\_ Somewhat \_\_\_\_Not at all

Please circle the **top 3 subjects** that you would like to focus on in Jobs for Life:

Finding job listings/openings Interview Skills Cover Letters

Making a good first impression Overcoming Obstacles Online Applications

Staffing Agencies (Temp Agencies) Conflict Resolution Resumes

Criminal Background Issues Working with Disabilities Team Work

Explaining gaps in work history Job search strategy Aging & the workforce

**WORK STATUS:** Your answers will NOT disqualify you from Jobs for Life and will be kept confidential

Are you a United States Citizen? Yes No

If no, can you provide proof of residency? Yes No

Are you currently legally authorized to work? Yes No

If no, are you in the process of securing work authorization? Yes No

Do you receive disability income? Yes No

Will you be able to provide the following forms?

1. US Social Security Card Yes No

2. US Green Card Yes No

3. Driver’s License Yes No

Please list any physical handicaps or other special needs:

**EDUCATIONAL BACKGROUND INFORMATION**

Circle highest level of education completed:

7th grade 8th grade 9th grade 10th grade 11th grade 12th grade GED

Vocational Training Junior College College Graduate School

Did you receive a certificate or diploma from a college or training facility? Yes No

If yes, what training/degree did you receive?

**SECURITY:** Your answers will NOT disqualify you from Jobs for Life and will be kept confidential

Do you have a criminal history? Yes No

Have you ever been convicted of a felony or misdemeanor or served time? Yes No

If yes, please describe below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Incident** | **Year** | **City, State** | **Charge & Release Date** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Are you willing to take a drug test? Yes No

(answering “No” will not disqualify a person from becoming a Jobs for Life student).

**PREVIOUS WORK EXPERIENCE: If you have a resume, you may attach it instead of completing this section**

List your last four employers, starting with your most recent or current employer. Include military and volunteer experience. Be as complete as possible.

Business Name:

Address:

Phone:

Start Date: End Date:

What is/was your job title?

What are/were your duties?

Who is/was your supervisor?

If you are no longer employed here, why did you leave?

Business Name:

Address:

Phone:

Start Date: End Date:

What is/was your job title?

What are/were your duties?

Who is/was your supervisor?

If you are no longer employed here, why did you leave?

Business Name:

Address:

Phone:

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JfL Applicant Signature Date