

Job Center Pre-Registration Form

Please complete this form and bring it with you to your initial appointment so that we may better serve you.

 First Name Middle Initial Last Name

_____/_____/_____
 Date of Birth

Work Assignment/Work Release _____
 Circle if N/A

Are you a Military Veteran? _____ Yes _____ No
 If yes, have you served over 180 days active duty: _____ Yes _____ No

 The following information will be used to put together your employment plan.

Do you know when you will release? _____ Yes _____ No Approximate date if known: _____

Where do you plan to release? _____ Don't Know

Do you have at least one support person where you will release (family, friend, other)? _____ Yes _____ No

Education Level: _____ High School Diploma _____ GED or Equivalent _____ Certificate of Completion
 _____ Associates Degree _____ Bachelor's Degree _____ Master's Degree
 _____ Doctorate Degree _____ Other Post-Secondary Degree
 _____ Other (less than High School, last grade completed) _____

What type of work are you interested in after release? Check any that apply but please do not answer anything.

- _____ Manufacturing/Assembly
- _____ Office/Accounting
- _____ Construction/Welding
- _____ Health Care Occupations
- _____ Other _____
- _____ Customer Service/Sales/Retail
- _____ IT/Financial
- _____ Other Skilled Trades (Plumbing, Electrical, etc.)
- _____ Food/Travel Industry

Do you have any restrictions or issues that will/could affect your ability to secure and maintain employment?

- _____ Transportation Concerns
- _____ Child Care/Other Family Responsibilities
- _____ Mental Health/AODA Issues
- _____ Communication Needs (phone/email)
- _____ Health/Disability
- _____ Basic Needs (food, shelter, health care)
- _____ Ongoing Treatment Needs
- _____ Do not wish to disclose at this time

Please expand upon any of the above so we can have a better understanding of how to serve you.
