

Customer name _____ Date _____

INITIAL SUITABILITY

How long have you been looking for work?

Language Barrier YES NO

PRIMARY LANGUAGE:

NOTE: Refer to Program Manager if there is a language barrier.

[X all that apply]

- Currently Employed
Hours per week [ADD #]:
Hourly Wage [ADD \$]

Are you able to support yourself or family with your current income? YES NO
If NO, please explain.

- Pending UI
- Receiving UI
- Exhausted UI

- Veteran
Separation Date (ADD MM/DD/YY):
- Spouse or Dependent of Veteran
- Ex-offender/Criminal Background

CUSTOMER IS SEEKING THE FOLLOWING SERVICES [ADD DETAILS]:

NON-WIOA PROGRAM PARTICIPATION

Customer is currently participating in the following Non-WIOA programs:

[X all that apply, then provide specific details below***]

- Vocational Schools, Community and/or State Colleges and Universities
- DOR - Department of Rehabilitation
- SDI - State Disability Insurance issued by EDD
- SSDI - Social Security Disability Insurance issued by SSA
- SSI - Supplemental Security Income issued by SSA
- Workers' Compensation
- Goodwill
- Ticket to Work
- SNAP - Supplemental Nutrition Assistance Program
- CalWORKs - California Work Opportunity and Responsibility to Kids
- GR General Relief
- TAA - Trade Adjustment Assistance
- ETP - Employment Training Panel

- Volunteers of America
- US Vets
- Other [ADD PROGRAM]:
- Other [ADD PROGRAM]:
- Other [ADD PROGRAM]:
- None of the above

ADDITIONAL NOTES [if applicable]:

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## INITIAL ASSESSMENT

Met with customer to assess appropriateness for enrollment and to determine which staff assisted services are needed.

### RESUME

[X all that apply]

Current Resume

Resume in CalJOBS

Resume next steps (ADD DETAILS):

### SKILLS & EDUCATION

Employment Skills (ADD DETAILS):

Educational Background (ADD DETAILS):

### BARRIERS

Barriers to Employment (ADD DETAILS):

Plan to Overcome Barriers (ADD DETAILS):

### EMPLOYMENT HISTORY (ADD DETAILS BELOW)

Most Recent Employer:

Job Title:

Length of Employment:

Hourly Wage:

Reason for Leaving:

Previous Employer:

Job Title:

Length of Employment:

Hourly Wage:

Reason for Leaving:

Previous Employer:  
Job Title:  
Length of Employment:  
Hourly Wage:  
Reason for Leaving:

**SERVICES REQUESTED**

Customer is requesting the following services:

[X all that apply, then provide specific details below\*\*]

- Job Search Assistance
- Training Assistance
- Other

\*\*Describe the services "X" above [ADD DETAILS]:

Based upon the initial assessment, customer is in need of staff assisted services, which may include but is not limited to, Basic Career Services, Individualized Career Services and/or Training Services for the following reasons (ADD DETAILS):

Additional notes (if applicable):

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