



WORKING FOR YOU

A proud partner of the American Job Center network

# Workforce Development System Rapid Response Customer Application and Information Survey

Please complete this form, as this will help us find services and programs that fit your needs. **Please print clearly.**

Date: \_\_\_ / \_\_\_ / \_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_ Social Security Number: \_\_\_ - \_\_\_ - \_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Gender: Male Female

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Cell phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Email: \_\_\_\_\_

Preferred language: \_\_\_\_\_

### Ethnicity/Race:

**Note: The Ethnicity and Race questions are voluntary. Information is confidential and will only be used for record keeping and affirmative action requirements. You will not be penalized if you do not want to answer.**

### Answer both Ethnicity and Race

Ethnicity: Hispanic Non-Hispanic Prefer not to disclose

Race: (check all that apply)

- |              |                           |                        |             |
|--------------|---------------------------|------------------------|-------------|
| White        | Black or African American | American Indian or     | Chinese     |
| Asian Indian | Filipino                  | Alaska Native          | Japanese    |
| Pakistani    | Samoaan                   | Korean                 | Bangladeshi |
| Burmese      | Native Hawaiian           | Vietnamese             | Nepalese    |
| Thai         | Guamanian and Chamorro    | Other Pacific Islander | Other Asian |

Do you have a disability? Yes No

### Education:

Education (check highest level completed) Grade:

NA 1 2 3 4 5 6 7 8 9 10 11 12

Vocational Degree/Certificate: Issuing institution: \_\_\_\_\_ Type: \_\_\_\_\_

Highest college level completed: Some College - 1 year 2 years 3 years  
Associate's Bachelor's Master's

College attended: \_\_\_\_\_ List major: \_\_\_\_\_ State: \_\_\_\_\_

School status: Attending School Not attending school If in school, list details:

**Veteran Status:**

Did you serve in the military? Yes No

If yes, dates of active service: \_\_\_ / \_\_\_ / \_\_\_ through \_\_\_ / \_\_\_ / \_\_\_

Military Branch: \_\_\_\_\_

Housing status:

- Own home
- Rent
- Homeless

Are you receiving compensation for a service-connected disability? Yes No

If yes, is your disability rating 30% or higher? Yes No

**Employment, Job Search & Preferences:**

Current employer name: \_\_\_\_\_ Job location: \_\_\_\_\_

Job title: \_\_\_\_\_ Wage/salary: \$ \_\_\_\_\_ hourly annual

Start date: \_\_\_ / \_\_\_ / \_\_\_ Layoff date (if known): \_\_\_ / \_\_\_ / \_\_\_ Length of time: \_\_\_ years \_\_\_ months

Job description: (be specific)

Job skills: (from all jobs/training)

Do you have a resume? Yes No Would you like help updating or creating a resume? Yes No

Would you like to receive information on:

- Interview Tips
- Cover Letter Writing
- Funding for Training
- Career Planning

What job titles will you be applying for during your work search? \_\_\_\_\_

List some businesses you might be interested in working at: \_\_\_\_\_

Are you thinking about enrolling in school or training? Yes No If yes, what type of training?

What is the minimum salary you expect to earn at your next position? \$ \_\_\_\_\_ hourly annual

What hours of work do you prefer? Full time Part time Preferred shift: First Second Third

How do you get to work? \_\_\_\_\_

How many miles are you willing to travel to work? 5 10 25 50

Do you have a Driver's License? Yes No If yes, issuing state: \_\_\_\_\_

What class of license do you have? \_\_\_\_\_