

# Assessment Report

Individual's name \_\_\_\_\_

Home phone number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

CID#: \_\_\_\_\_  Tier 1-PG 1  Tier 2- PG 2 or 3

**List Previous Employment:**

Employer	Job Title	Start Date	End Date	Wage	Reason for leaving

**List educational institutions and/or training programs:**

Name of School	City, State	Years	Degree/Diploma/Certificate

IPE Vocational Goal, if known: \_\_\_\_\_ Requested Weekly Work Goal (hours per week): \_\_\_\_\_

**Individual's career interest(s) expressed during assessment:**

Prospective Employer	Job(s) identified with employer

**Summary of job skills as identified in the assessment process (Examples include but are not limited to soft skills, customer service skills, typing skills (minimum 35 WPM), cashier skills, welding skills, etc.):**

**Supports needed: list all – job search training, digital/electronic resume writing and/or video résumé, interview skills, transportation, housing, childcare, money management, life skills management, clothing, shoes, etc.**

**Individual’s comments regarding expectations of work:**

**Summary EC observations/comments from assessment:**

**For ER & JP only, submit Electronic Résumé with other required service documentation.**

EC Name: \_\_\_\_\_ Date: \_\_\_\_\_