**COVID-19 guidelines are to be followed by all Jobs for Life participants throughout the course of the semester.**

**Jobs for Life Applicant Background 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.

***NOTE: After completing this, SAVE it as a WORD document or PDF and attach it in an email to:*** gingerjames1@icloud.com.

**GENERAL INFORMATION**

Name:            Male Female

Address:

City:       State:       Zip Code:

Phone:       Email:

Date of Birth:

Ethnicity: (circle one) Caucasian African American Native American Hispanic Asian

Other

**WORK STATUS**

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

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 grade completed: 9 10 11 12/GED  Vocational Training Community 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**

Do you have a criminal history? Yes No

Have you ever been convicted of a felony and/or served time in the past? Yes No

If yes, please describe below. Note: Providing this information will **NOT** disqualify a person from becoming a Jobs for Life student.

Incident

Year       City, State       Charge and Release Date

**CURRENT EMPLOYMENT STATUS**

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 Other

If other, please explain:

**JOBS FOR LIFE TRAINING INFORMATION**

Will you need childcare during your Jobs for Life training? **Childcare unavailable due to COVID-19.**

What is your reason for taking Jobs for Life training?

What is your present job goal or objective?

**PREVIOUS WORK EXPERIENCE**

List your last three 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:

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?

(For Site Director/Minister use only)

**INTAKE STATUS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date of in-person interview: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Interviewed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant accepted for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ semester

Applicant signature (to be signed at in-person interview) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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