

Career & Training Services Checklist

Name: _____

Date: _____

Basic Career Services

(self-help or minimal staff assistance)

- Orientation to one-stop services
 - Job Search and placement assistance
 - Labor Market information
 - Filing for unemployment compensation
 - Initial Assessment of skill level, aptitudes, abilities, and supportive service needs.
 - Assistance in establishing eligibility for programs of financial aid assistance for training and education programs not funded under WIOA
 - Availability of supportive service
-

Basic Career Services to Individualized Career Services

Date: _____

- Initial Assessment indicating individualized services are necessary

TITLE IB ADULT ELIGIBILITY:

- Eligibility determination- application form
 - U.S. Citizen, Registered Alien
 - 18 years of age or older
 - Meet selective service requirements
- Received basic career services

PRIORITY FOR SERVICES

- Recipient of public assistance or other low-income individual
- Basic Skills Deficient
 - TABE test results (within last 6 months) **OR** Actively participating in Adult Basic Education and Learning Program

TITLE IB DISLOCATED WORKER ELIGIBILITY:

- Eligibility determination – application form
- U.S. Citizen or Registered Alien
- Received basic career services (e.g. Rapid Response activities)

PRIORITY FOR SERVICES

- Plant/business closures or significant dislocation events
- Long term unemployed

Individualized Career Services to Justify Training Services

Date: _____

___ IEP indicating that training is necessary to lead to self-sufficiency

Initial & Comprehensive Assessment

Work History: _____

Family Situation (support): _____

Education: _____

Occupational Skills: _____

Interests: _____

Attitudes toward work: _____

Motivation: _____

Financial Resources and needs: _____

Supportive Service Needs: _____

Basic Skills Assessment: ___ TABE (required if no acceptable alternative)

Acceptable Alternatives:

___ GED received in the last year

___ Degree or certificate from college, university or technical school

___ Collateral contacts with school/college which include the name and results of the assessment

___ Copy of post-secondary grades sufficient to demonstrate the participant's basic skill proficiency

___ COMPASS (College Placement Tests) taken within the last year and using the latest version of the test (updated in 2010)

Career Planning/Exploration:

___ MCIS (**required**)

Date: _____

Optional Assessments:

___ COPS/ CAPS/COPEs

Date: _____

___ Other _____

Date: _____

Orientation

- ___ Program Introduction (purpose and goals)
- ___ Rules and regulations of program
- ___ WIOA service provider responsibilities
- ___ Participant responsibilities
- ___ Program resources and supportive service available
- ___ Job related injury procedures
- ___ Wage and pay information
- ___ Equal Opportunity is the Law

Referrals to Other Service Providers

- ___ _____
- ___ _____
- ___ _____
- ___ _____
- ___ _____
- ___ _____
- ___ _____

Labor Market Information

- ___ National Job Trends (supply and demand)
- ___ Local Job Opportunities
- ___ Education and skill requirements for jobs
- ___ Job seeking skills (writing resumes, job interview techniques, etc.)
- ___ Other _____
- ___ Other _____