

Welcome To Our VI Career Network One Stop Center

HOW CAN WE HELP YOU? (Please check all that apply)

- ☐ Help finding work / Job referrals
- ☐ Information about Unemployment Insurance (UI)
- ☐ Information about services for job seekers with disabilities
- ☐ Help finding a new career that fits my skills and interest
- ☐ Vocational /Occupational training
- ☐ Job search skills (resume writing, how to look for work, interviewing, keeping the job etc.
- ☐ Information about education (GED)
- ☐ To improve my basic skills (Reading, Math)
- ☐ To learn English
- ☐ Information about YouthNet and / or Youth Services

DATE

I need

Other

LAST NAME

FIRST NAME

MIDDLE INITIAL

SSN

DATE OF BIRTH

ALIEN #

Gender

STREET ADDRESS

CITY

STATE

ZIP CODE

MAILING ADDRESS

CITY

STATE

ZIP CODE

HOME PHONE

WORK PHONE

CELL PHONE

EMAIL

Registered with Selective Service?

ETHNICITY:

EDUCATION STATUS: Highest grade

EMPLOYMENT STATUS: Are you currently working?

What kind of work are you looking for? Or main occupation?

Degrees, licenses or credentials you hold:

ADDITIONAL INFORMATION:

Refugee /Asylee

Homeless

Ex- Offender

Migrant/ Seasonal Farm Worker

Veteran of the US Military

Current or former Foster Youth

Person with Disability

Receiving Unemployment

Received Unemployment
(within the last 12 months)

Receiving Public Assistance
(GA, TANF, Food Stamps, RCA, SSI)

WORK HISTORY (Please start with last job held)

1. Company Name

Company Address

Start Date

End Date

JobTitle

City

State

Job Duties

Hourly Wages \$

☐ PT

☐ FT

Reason for leaving

2. Company Name <input style="width: 350px;" type="text"/>		Company Address <input style="width: 300px;" type="text"/>	
Start Date <input style="width: 100px;" type="text"/>	End Date <input style="width: 100px;" type="text"/>	Job Title <input style="width: 400px;" type="text"/>	
City <input style="width: 150px;" type="text"/>	State <input style="width: 100px;" type="text"/>	Job Duties <input style="width: 400px;" type="text"/>	
Hourly Wages \$ <input style="width: 100px;" type="text"/>		<input type="checkbox"/> PT <input type="checkbox"/> FT	Reason for leaving <input style="width: 200px;" type="text"/>

3. Company Name <input style="width: 350px;" type="text"/>		Company Address <input style="width: 300px;" type="text"/>	
Start Date <input style="width: 100px;" type="text"/>	End Date <input style="width: 100px;" type="text"/>	Job Title <input style="width: 400px;" type="text"/>	
City <input style="width: 150px;" type="text"/>	State <input style="width: 100px;" type="text"/>	Job Duties <input style="width: 400px;" type="text"/>	
Hourly Wages \$ <input style="width: 100px;" type="text"/>		<input type="checkbox"/> PT <input type="checkbox"/> FT	Reason for leaving <input style="width: 200px;" type="text"/>

By signing below, I acknowledge that have received copies of: 1) Customer Bill of Rights 2) Greivance procedure and; 3) Code of Conduct. I certify that the information provided is true to the best of my knowledge. I am also aware that the information I have provided is subject to review and verification and that I may have to provide documents to support this application.

Signature <input style="width: 250px;" type="text"/>	Date <input style="width: 100px;" type="text"/>
Parent Signature <input style="width: 250px;" type="text"/>	Date <input style="width: 100px;" type="text"/>

FOR UNEMPLOYMENT INSURANCE APPLICANTS ONLY

- | | |
|--|--|
| 1. Do you expect to be recalled by the employer who laid you off? | 1. <input style="width: 60px;" type="text"/> |
| 2. If yes, what is the approximate recall date? <input style="width: 100px;" type="text"/> | 2. <input style="width: 60px;" type="text"/> |
| 3. Have you worked in any other state within the last 18 months? | 3. <input style="width: 60px;" type="text"/> |
| 4. If yes, what state was it? <input style="width: 70px;" type="text"/> | 4. <input style="width: 60px;" type="text"/> |
| 5. Have you worked in any Military and /or federal service? | 5. <input style="width: 60px;" type="text"/> |
| 6. Are you required to make Child Support payments? | 6. <input style="width: 60px;" type="text"/> |
| 7. Are you a U. S. citizen? | 7. <input style="width: 60px;" type="text"/> |
| 8. Are you a Permanent Resident? Alien # <input style="width: 100px;" type="text"/> | 8. <input style="width: 60px;" type="text"/> |
| 9. Is there any reason you cannot work right now? | 9. <input style="width: 60px;" type="text"/> |
| 10. Have you worked since Sunday of this week, if so amount earned? | 10. <input style="width: 60px;" type="text"/> \$ <input style="width: 60px;" type="text"/> |

I hereby register for work and claim unemployment benefits. I know that the law prescribes penalties for false statements made in connection with this claim. I CERTIFY underpenalty or perjury that the statements made in connection with claim are true to the best of my knowledge and belief. In accordance with the applicable provisions of the Privacy Act of 1974 (PL 93-579). I AUTHORIZE my former employer(s) to release all information requested in connection with your claim for unemployment compensation. I am furnishing my Social Security number as required by the Deficit Reduction Act (DEFRA) (PL 98-369) as a condition of eligibility for benefits. I understand that information regarding my claim may be frunished to requesting agencies defined in DEFRA for the purpose of income and eligibilty verification.

Signature <input style="width: 250px;" type="text"/>	Date: <input style="width: 100px;" type="text"/>
Interviewer Signature <input style="width: 250px;" type="text"/>	Date: <input style="width: 100px;" type="text"/>

***** FOR OFFICIAL USE ONLY*****

Staff Initials

Right- to - Work Documents Viewed: ☐

AOSOS Customer ID Assigned:

Date

Is there any reason that you cannot work right now?
Have you worked since sunday of this week, if so , what is
the amount earned?

\$

CUSTOMER REFERRAL / ACTION PLAN

TALENT DEVELOPMENT

- ☐ Workforce Intelligence
- ☐ Computer Literacy
- ☐ Career Assessment
- ☐ In-depth Skills Assessment
- ☐ Career / Technical Education
- ☐ Vocational Training
- ☐ On- line Training / Distance learning
- ☐ Tuition Assistance
- ☐ Subsidized Employment
- ☐ Support Services
- ☐ Pre - Employment Skills
- ☐ Basic Skills
- ☐ Soft Skills

TALENT MARKETING

- ☐ Workforce Intelligence
- ☐ Resume Assistance
- ☐ Interviewing Assistance
- ☐ Job matching / Referrals
- ☐ Pre-screening / Referrals
- ☐ Job Fairs
- ☐ Employment Networking
- ☐ Job Coaching / Career Counseling
- ☐ Employer Orientations / Interviews

UNEMPLOYMENT INSURANCE

- ☐ New Registrant
- ☐ Update infomation
- ☐ BRI Date