Dislocated Worker Survey

<u>Instructions</u>: Please complete the following information. All information in this survey is confidential and will be used as a group to create a service proposal that best meets the needs of all employees. Completing the survey will not necessarily result in services from the Workforce Investment Act programs.

Today's Date:

Section A: About Your Cur	rent Job O	r the Job You Were	e M	lost Recently L	aid Off From	
Employer Name:		Job Title:				
Employer Address:						
What is your last day of work?		How many years or months of service do you have with this employer?				
What is/was your most recent wage/salary with this employer?		Do you belong to a union? Yes Please List Union Name/Local #:				
Section B: Individual Information						
Name:		What is your age range? 16-21			22 or above	
Address:		City:			Zip:	
Phone (home or cell):		Email:				
I have already lined up a replacement job: Yes When will you start the new job:						
What is your educational level:						
Less than High School/GED	Some college			Associate degree/professional		
High School/GED completion	Some trad	e/technical college		certificate		
Attained a certificate/license			Post Graduate degree			
Do you need additional language or accommodations? Please list:						
Section C: Looking Ahead						
Which of the following services are you interested in:						
I do not need/ want any services at this	please list) Information on the Workforce Investment Act and services at the O Stops					
Help finding a new job	☐ Information on the labor market		Updating skills in math, reading, writing			
Training to update job specific skills	Training in new occupation		Training in basic computer skills			
☐Information on re-training options	Information on financial support		Help with job search skills, resume writing, interviewing, job search tips			
Training on how to start a business Attainment of a High School diploma / General Education Degree						
If you are interested in commuting for a new job, how far:						
Is it alright to follow-up with you? Yes No						
What is your preferred method of contact? mail phone email						