



Assisting People in Need
Here ♦ There ♦ Everywhere

Job Seekers Workshop Questionnaire
(Please check the appropriate box)

Date _____

Name: _____

Contact Number(s): _____

Email: _____

Employment Status:

Current Employed:

Unemployed: 1 month 3 months 6 months 1 year
Longer

Occupation or Last Job Held: _____

Area of Desired Employment: _____

Would you be interested in seeing a Job Coach? Yes No

What avenues have you explored in looking for a Job _____

Do you have a Resume? YES
NO

Do you want to enhance your job skills? Yes
No

Computer Skills: None Some Proficient

When is the best time for you to attend a Job seekers workshop

Date _____ Time _____ AM or PM

Facta Non Verba ♦ "Deeds Not Words"