NC Senior Community Service Employment Program is funded by a U.S. Dept. of Labor grant

NORTH CAROLINA
Senior Community Service Employment Program

PARTICIPANT NEEDS ASSESSMENT

Applicant/Participant’s Name: __________________________ Date: ________________

Interviewer Name: __________________________________ Date: ________________

Background & Work History

List the types of jobs or other experience that the applicant/participant had in the past:
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

List the skills that have been acquired from these jobs and/or experience:
________________________________________________________________________________________________
________________________________________________________________________________________________
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List any other relevant hidden or transferable skills or abilities of the applicant/participant:
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
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Jobs Goals & Qualifications

First job in which applicant/participant is interested: ___________________
List the qualifications for this job:
________________________________________________________________________________________________
________________________________________________________________________________________________
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________________________________________________________________________________________________
<table>
<thead>
<tr>
<th>Barriers to Employment</th>
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**First job in which applicant/participant is interested:**
- List the qualifications for this job:
  - 
  - 
  - 

Does applicant/participant meet these qualifications?  □ Yes  □ No
If not, list what can be done to help the applicant/participant meet the qualifications:
- 
- 
- 

**Second job in which applicant/participant is interested:**
- List the qualifications for this job:
  - 
  - 
  - 

Does applicant/participant meet these qualifications?  □ Yes  □ No
If not, list what can be done to help the applicant/participant meet the qualifications:
- 
- 
- 

**Third job in which applicant/participant is interested:**
- List the qualifications for this job:
  - 
  - 
  - 

Does applicant/participant meet these qualifications?  □ Yes  □ No
If not, list what can be done to help the applicant/participant meet the qualifications:
- 
- 
- 

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Which of the following might affect the applicant/participant's ability to get a job? (check all that apply)  

- Age discrimination
- Caring for a disabled family member
- Earnings will decrease other benefits
- Education
- Job search skills
- Limited English
- Personal health/disability
- Rent subsidy will increase
- Self confidence
- Transportation
- Work experience
- Other potential barrier: __________________________________________
- Other potential barrier: __________________________________________

Provide any details or explanation necessary:

What can be done by the applicant/participant and/or program to overcome these barriers?:

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Assessment of Reading Skills: □ Excellent □ Good □ Fair □ Poor
Assessment of Math Skills: □ Excellent □ Good □ Fair □ Poor
Above assessments based on: □ observation; □ testing:

Availability & Preference for work

- Full Time  □ Part Time  ____ hrs/wk □ Days □ Evenings □ Weekends

Acceptable wage for unsubsidized job: $ ____________  Income limit? $ _____________

Desired location for unsubsidized job: _________________________________________________________________

Transportation: □ own car  □ other’s car  □ bus □ other: ___________________________________________

Any limiting factors: (i.e.: functional limitations, physical limitations, family obligations, etc.)

_________________________________________________________________________________________________
### Perceptions of Participant's Job Readiness (If not sure, leave blank)

<table>
<thead>
<tr>
<th>Category</th>
<th>Excellent/Good</th>
<th>Fair</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marketable Skills for Desired Job(s)</td>
<td></td>
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<tr>
<td>Work Experience Needed for Desired Job(s)</td>
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<tr>
<td>Job Seeking/Job Keeping Skills</td>
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<tr>
<td>Motivation for Finding Unsubsidized Job</td>
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<tr>
<td>Self Confidence/Assertiveness</td>
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<tr>
<td>Aptitudes for Desired Job(s)</td>
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<tr>
<td>Communication Skills: Verbal</td>
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<td>Written</td>
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<tr>
<td>Access to Transportation to Desired Job</td>
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<tr>
<td>Appearance for Desired job</td>
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<tr>
<td>Health for Desired Job</td>
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<td>Other: ______________________________________________</td>
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<tr>
<td>Other: ______________________________________________</td>
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</table>

### Narrative

List any other information or observations which should be noted:

________________________________________________________________________________________________
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List any notes, applications, resume, documentation of education/work history, test results, etc.

________________________________________________________________________________________________
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The above information represents my best assessment of this applicant/participant at this time.

Signature of SCSEP Staff: ________________________________  Date: __________________________

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