Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EJAS ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BFET Provider: Grays Harbor College Contractor Code: 6AY

Case Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Intake: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Employment Goals** | |
| Career Plan: |  |
| Wage Expectation: |  |
| Immediate Job Goals(s): |  |
| Target Employment Date: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Skills and Qualifications** | | | | | |
| *Education* | | | | | |
| High School Diploma or Equivalent | | | | | |
| College Education | | Degree: | | | |
| Vocational Training | | Certificate: | | | |
| *Work Experience* | | | | | |
| Number of employers in past 5 years:  *List Employment History on separate sheet* | | | |  | |
| No work experience in the past year | | | | | |
| *Transferrable Skills* | | | | | |
| Customer service | | | Solve problems | | Organized |
| Write clearly | | | Calculate, compute | | Manage people |
| Speak in public | | | Listening | | Run meetings |
| Speak multiple languages | | | Managing time | | Direct projects |
| Communicate verbally | | | Being punctual | | Other: |
| Handle food | | | Cooperating | | Other: |
| Manage money | | | Follow instructions | | Other: |
| Take orders | | | Construct or repair | | Other: |
| Operate office equipment | | | Drive or operate vehicles | | Other: |
| Computer Skills | | | Operate tools and machinery | | Other: |
| *Other Qualifications* | | | | | |
| Certificate: |  | | | | |
| Professional License: |  | | | | |
| Other: |  | | | | |

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| **Assessed Employment Barriers** | | |
| *Client Employment Barriers* | | *Services to Address Barriers* |
| Skill Deficiency | |  |
| High School Diploma or Equivalency | |  |
| Lack of Qualifications for Desired Employment | |  |
| Lack of Employment History | |  |
| Limited English Proficiency | ESL Level: |  |
| Physical Health | |  |
| Mental Health | |  |
| Chemical Dependency | |  |
| Criminal Record affecting Employment | |  |
| Required Employment Verification (i.e. ID / Birth Certificate, Driver’s License, SSN Card) | |  |
| Resource Deficiency (i.e. childcare, transportation, personal hygiene) | |  |
| Housing | |  |
| Other: | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Employment Plan** | | | | | | |
| ***Education/Training Plan*** | | | ***VE*** ***BE*** *(Including ESL)* | | | |
| Educational Institution | |  | | | | |
| Dates of Training: | | From: | | | To: | |
| Academic Goal: | |  | | | | |
| Degree/Certification: | |  | | | | |
| ***Job Readiness Training (JT)*** | | | | | | |
| Job Search Training (i.e. resume writing; interview skills, master application, workplace etiquette) | | | | From: | | To: |
| Work Experience (i.e. internship, OJT) | | | | From: | | To: |
| ***Job Search (JS)*** | | | | | | |
| Independent Job Search: | | | | From: | | To: |
| Job Search with Assistance: | | | | From: | | To: |
| ***Job Retention (BR)*** | | | | | | |
| Other: |  | | | | | |

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| **Declaration and Signature** |

The following are the requirements to participate in the Basic Food Employment & Training (BFET) program:

* Receive Basic Food Assistance from DSHS;
* Be able to work at least 20 hours per week;
* Cooperate with the requirements of this Individual Employment Plan; and
* Meet with your BFET case manager at least monthly.

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| --- | --- | --- | --- | --- |
| I, |  | | | , have read the requirements and agree to abide by them. |
|  | *(Print Name)* | | |  |
| Yes | | No | I understand this form and the contents have been explained to me in my primary language. | |

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|  |  |  |
| *Client Signature* |  | *Date* |
|  |  |  |
| *Case Manager Signature* |  | *Date* |
|  |  |  |
| *Interpreter Signature (required if client cannot understand this form in English)* |  | *Date* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employment History** | | | | |
| Employer: |  | | | |
| Dates of Employment: | From: | | To: | |
| Wages: |  | Hours Per Week: | |  |
| Job Title: |  | | | |
| Work Performed: |  | | | |
| Reason for Leaving: |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employer: |  | | | |
| Dates of Employment: | From: | | To: | |
| Wages: |  | Hours Per Week: | |  |
| Job Title: |  | | | |
| Work Performed: |  | | | |
| Reason for Leaving: |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employer: |  | | | |
| Dates of Employment: | From: | | To: | |
| Wages: |  | Hours Per Week: | |  |
| Job Title: |  | | | |
| Work Performed: |  | | | |
| Reason for Leaving: |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employer: |  | | | |
| Dates of Employment: | From: | | To: | |
| Wages: |  | Hours Per Week: | |  |
| Job Title: |  | | | |
| Work Performed: |  | | | |
| Reason for Leaving: |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employer: |  | | | |
| Dates of Employment: | From: | | To: | |
| Wages: |  | Hours Per Week: | |  |
| Job Title: |  | | | |
| Work Performed: |  | | | |
| Reason for Leaving: |  | | | |