

In each section, please check all appropriate boxes.

Sex: Male Female

Marital Status: Single Married Divorced Widowed

Ethnicity:

Are you Hispanic and/or Latino? Yes No Not Specified

Race:

- Black or African American American Indian/Alaskan Native
 White Hawaiian Native or other Pacific Islander
 Asian Not Specific

Living Situation:

- With Family/Friends Halfway House Own Residence
 Homeless Shelter Work Release Program Other: _____

Are you currently employed? Yes No

Do you reside in low income/subsidized housing? Yes No

Do you receive TRA? Yes No

Is English the main language spoken in your home? Yes No

If no, what is the primary language spoken in your home? _____

Will communicating in English cause a problem at work or school? Yes No

Have you served in the U.S. Military? Yes No

If yes, what branch of the military? _____

Do you have a NJ Driver's License? Yes No

Are you currently in foster care? Yes No

Do you have a physical or learning disability? Yes No

How were you informed about WIOA-Youth Program? (Check all that Apply)

- St. Paul's Staff If yes, please name: _____
 Guidance Counselor If yes, please name: _____
 Social Service Agency If yes, please name: _____
 Referral from Organization If yes, please name: _____
 Parole/Probation Officer If yes, please name: _____
 TV/Radio/Advertisement If yes, please name: _____
 Friend/ Family Member Other: _____

EDUCATION (Circle one)

Do you have a GED? Yes No

Do you have a High School Diploma? Yes No

When you were in school, did you have an IEP (Individual Evaluation Plan) or where you were diagnosed with a learning disability? Yes No

What was the last public/private school you attended? _____
City, State _____

What was the highest grade you completed? _____ Number of years out of school _____

How Many Credits Completed? _____ Which Classes Completed? _____

What was your favorite subject? _____

Have you ever taken the GED examination? Yes No

If yes, what areas did you pass? (Circle all that apply.)

Math Reading Social Studies Writing Science

If you did not receive a GED or high school diploma, why did you leave school?

Did you take any shop courses in school? Yes No

If yes, what courses did you take? _____

Do you plan to go to college? Yes No Undecided

HEALTH

Do you:

Need eyeglasses Smoke cigarettes Have asthma Use illegal drugs Have allergies

Have prescribed medication Have Diabetes

Do you have any other physical, medical, mental or other health issues? Yes No

If yes, please specify: _____

When was the date of your last physical exam? _____

ARRESTS AND CONVICTIONS

Have you ever been arrested? Yes No

Have you ever been convicted/adjudicated of a crime? Yes No (Answer "yes" if you plead guilty to any charge.)

If yes, please list charges: _____

Case Outcome (Circle all that apply)

Probation

Fines

Detention/Incarceration

Other: _____

If you have ever been detained and/or incarcerated in a correctional facility, list name: _____

Are you currently on probation or parole? Yes _____ No _____

If yes, please list Probation/Parole Officer Name: _____

Address: _____

Contact Number: _____ Reporting Day/Time: _____

TRAINING AND WORK HISTORY

Have you participated in any other work training program? Yes No

If yes, please specify program: _____

Do you have any construction experience? Yes No

If yes, please describe:

Have you ever held a job before? Yes No

If yes, what was the last company you worked for? _____

When did you start there? _____ When did you leave? _____

What was your hourly pay? _____ Supervisor's Name: _____

What were your job responsibilities? _____

By signing below, I state that the information provided on this application is accurate to fullest extent of my knowledge. I understand that completion of this application does not guarantee admittance into a WIOA-Youth Program.

Signature

Date