

HENNEPIN COUNTY DWP BARRIER IDENTIFICATION

Part I. Client General Information

Date _____

Start Date: _____ End Date: _____

Name: _____ Case #: _____

Address: _____ Apt. _____

City: _____ State: _____ Zip: _____

Phone: _____ Message Phone: _____

Part II. Skills & Knowledge

a. Does the client have a resume? Yes No *(If no, complete Part II)*

What is the client's highest level of Education?

- None
- High School but did not graduate
- High School graduate
- GED
- Some college
- Degree
- Any special education: if yes, please explain

b. List all languages and check the applicable box (es) below.

Write	Speak	Language
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

c. Experience & skill *(use a separate paper for more details)*
Enumerate the duties, tasks and responsibilities in all paid and voluntary work.

Part III. Other (Check one that applies the client)

- a. Means of transportation is available to the client. Public Private
- b. Preferred work shift. First Second. Third. Any
- c. Criminal Record? Yes No
- d. Email address? Yes No
- e. Health Conditions that would interfere with the client's ability to work.

Clients Email address _____

Desired Job:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Preferred Shifts:

- First Shift
- Second Shift
- Third Shift
- All of the above

Comments / suggestions/ Interventions :-

Employment Counselor: _____