

Career Seekers

Individual Service Strategy

The ISS builds upon information gathered during the intake and assessment interview with each individual Career Seeker (CS).

Name: _____ Social Security # _____

I. SKILLS:

List skills or talents **which can be applied to a job?** Be as specific as possible. (Use Quick Job Search, p.3-6)

II. CAREER GOALS:

What kind of job would the CS like to be doing 5 years (or more) from now?

III. IMMEDIATE JOB GOALS:

What kind(s) of job(s) would the CS like right now?

IV. SKILL ATTAINMENT GOALS

Short Term

- _____ Improve basic academic skills
- _____ Develop a resume
- _____ Obtain a job (type of job) _____

Long Term (choose at least one)

- _____ Obtain a full-time job in desired career (specify) _____
- _____ Enter the military
- _____ Enter vocational training, college, or an apprenticeship program (list type of training) _____
- _____ Other (specify) _____

V. CHALLENGES: (check all that apply) All Career Seekers will have one or more challenges.

1. Academic: TABE Reading _____ TABE Math _____
_____ Reading/Math Deficiencies _____ School dropout _____ Other

2. Employment History: Specify if CS has limited or spotty job history _____

3. Family/housing: Please list the members of your **household** including their age and relationship to you: _____

Please explain any housing concerns or issues: _____

4. Drugs or alcohol: Has the CS received drug/alcohol treatment? Would the CS like a referral for counseling on this issue? Some of our jobs require drug screening. Could the CS pass a drug test today?

Explain: _____

5. Health: Are there any health or physical conditions for which the CS might need accommodations or which could affect employment, e.g. asthma, pregnancy, etc. Please detail the condition and list any necessary accommodations. _____

6. Legal: Is the CS on probation or parole? Are they here as a condition of their release? Do they have a criminal record which will have to be explained on a job application? Please detail. _____

7. Transportation How will the CS get to classes and employment? Be specific.

8. Other concerns which may hinder employment or academic progress (describe):

Career Seeker Signature

Date

Parent Signature (if under 18)

Date

Career Seeker Advisor Signature

Date

Career Seeker Provider

ESN

JJC

L&S

Name _____

Review Date _____

Today's Date _____

**INDIVIDUAL SERVICE STRATEGY
60 DAY ACTION PLAN**

ACADEMIC GOALS:

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

EMPLOYMENT GOALS:

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

OTHER PERSONAL GOALS (Describe- see page 2):

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

USE ADDITION PAGES AS NECESSARY

Career Seeker Signature

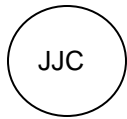
Date

Career Seeker Advisor Signature

Date

Career Seeker Provider

ESN



L&S

Name _____

Review Date _____

Today's Date _____

**INDIVIDUAL SERVICE STRATEGY
6 MONTH ACTION PLAN**

ACADEMICS:

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

EMPLOYMENT

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

OTHER (Describe- see page 2) _____

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

USE ADDITION PAGES AS NECESSARY

***(NOTE: PLEASE UPDATE FOLLOW UP CONTACTS INFORMATION
AT THIS INTERVIEW)***

VIII. Signatures

Career Seeker Signature

Date

Career Seeker Advisor Signature

Date

Career Seeker Provider

ESN

JJC

L&S

Name _____

Review Date _____

Today's Date _____

**INDIVIDUAL SERVICE STRATEGY
1 YEAR ACTION PLAN**

ACADEMICS:

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

EMPLOYMENT

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

OTHER (Describe- see page 2) _____

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

USE ADDITION PAGES AS NECESSARY

(NOTE: PLEASE UPDATE FOLLOW UP CONTACTS INFORMATION AT THIS INTERVIEW)

Career Seeker Signature

Date

Career Seeker Advisor Signature

Date

Career Seeker Provider

ESN

JJC

L&S

Name _____

Review Date _____

Today's Date _____

**INDIVIDUAL SERVICE STRATEGY
5 YEAR ACTION PLAN**

ACADEMICS:

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

EMPLOYMENT

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

OTHER (Describe- see page 2)

GOAL # 1 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

GOAL # 2 _____

Steps to be taken: _____

Person responsible: _____

Result: _____

Date of completion: _____

USE ADDITION PAGES AS NECESSARY

Career Seeker Signature

Date

Career Seeker Advisor Signature

Date

Career Seeker Provider

ESN

JJC

L&S