



WIOA Application

for Career Planning, Training, and Job Search Services

**Please complete the attached form, then return it to us in one of the following ways.
If you need help completing or submitting this form, please call (630) 955-2030.**

Instructions for Fillable PDF

Before beginning, ensure that you have downloaded this document to the device that you will be using to complete it. Failure to download the application may prevent the information that you enter from saving.

Résumé

Please include a copy of your resume with your application, if possible.

EMAIL	IN-PERSON OR BY MAIL	FAX
<p>Email your completed application to:</p> <p>applications@worknetdupage.org</p>	<p>Deliver or mail your completed application to:</p> <p>workNet DuPage Career Center 2525 Cabot Drive Suite 302 Lisle, IL 60532</p>	<p>Fax your completed application to:</p> <p>(630) 955-2059 Attn: M.F.G.</p>



WIOA Application for Career Planning, Training, and Job Search Services

Date: _____

YOUR INFORMATION

	<input type="checkbox"/> 16-24	<input type="checkbox"/> 25-54	<input type="checkbox"/> 55+
Full Name	Age		
Address	City	Zip Code	
Email	Phone	<input type="checkbox"/> Yes <input type="checkbox"/> No May we text you at this number?	

DEMOGRAPHIC INFORMATION

Gender at birth: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to answer	Hispanic or Latino: <input type="checkbox"/> Yes <input type="checkbox"/> No	Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hawaiian or Pacific Island <input type="checkbox"/> White <input type="checkbox"/> Prefer not to answer
Do you have a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer	Veteran Status: <input type="checkbox"/> Veteran <input type="checkbox"/> Qualified spouse of veteran <input type="checkbox"/> Transitioning service member <input type="checkbox"/> Not a Veteran	

HOW DID YOU HEAR ABOUT WORKNET DUPAGE?

<input type="checkbox"/> Community Organization	
<input type="checkbox"/> Friend or Family Member	
<input type="checkbox"/> Online Search	
<input type="checkbox"/> Social Media	
<input type="checkbox"/> School	
<input type="checkbox"/> Other	



OUR SERVICES

- How can we help you?**
- Funding for Training
 - Job Search Workshops
 - Resume Help
 - Interviewing Practice
 - Career Exploration & Planning
 - Job Leads & Help Landing a Job
 - Young Adult Internships (17-24)

FINANCIAL ASSISTANCE INFORMATION

Are you currently receiving, or have you received, Unemployment Insurance?

- Yes No

All forms of financial assistance received by your household in the last 6 months:

- Food Stamps (SNAP)
- Social Security Disability Insurance (SSDI)
- Supplemental Security Income (SSI)
- Temporary Aid to Needy Families (TANF)
- Refugee Assistance

CHALLENGES TO GAINING AND KEEPING EMPLOYMENT

Check all that apply to you:

- English is not primary language
- Foster child / Youth aged out of foster care
- Homeless
- Lacking skills and education
- Misdemeanor or felony
- No GED or high school diploma
- Pregnant/Parenting (Only check if you are ages 17-24)
- Not applicable

Other challenges to gaining and keeping employment: _____

EDUCATION

Highest level of education achieved:

- No high school diploma/GED
- High school diploma/GED _____ (Graduation year)
- Some college _____ (Number of years)
- Associates _____ (Graduation year)
- Bachelors _____ (Graduation year)
- Masters _____ (Graduation year)
- Doctorate _____ (Graduation year)

If you are currently enrolled in school or registered for classes, please indicate where:



WORK HISTORY

MOST RECENT EMPLOYER

Employer:	_____		Your job title:	_____	
Hours/week:	_____	Salary:	<input type="checkbox"/> Less than \$29,999 (\$15/hr or less)	Reason for leaving:	<input type="checkbox"/> Fired
Start Date:	_____		<input type="checkbox"/> \$30,000-\$49,999 (\$16-\$25/hr)		<input type="checkbox"/> Laid Off
End Date:	_____		<input type="checkbox"/> \$50,000-\$74,999 (\$26-\$38/hr)		<input type="checkbox"/> Quit
	(Month/Year)		<input type="checkbox"/> \$75,000 and up (\$39/hr and up)		<input type="checkbox"/> Still working here

EMPLOYER 2

Employer:	_____		Your job title:	_____	
Hours/week:	_____	Salary:	<input type="checkbox"/> Less than \$29,999 (\$15/hr or less)	Reason for leaving:	<input type="checkbox"/> Fired
Start Date:	_____		<input type="checkbox"/> \$30,000-\$49,999 (\$16-\$25/hr)		<input type="checkbox"/> Laid Off
End Date:	_____		<input type="checkbox"/> \$50,000-\$74,999 (\$26-\$38/hr)		<input type="checkbox"/> Quit
	(Month/Year)		<input type="checkbox"/> \$75,000 and up (\$39/hr and up)		<input type="checkbox"/> Still working here

EMPLOYER 3

Employer:	_____		Your job title:	_____	
Hours/week:	_____	Salary:	<input type="checkbox"/> Less than \$29,999 (\$15/hr or less)	Reason for leaving:	<input type="checkbox"/> Fired
Start Date:	_____		<input type="checkbox"/> \$30,000-\$49,999 (\$16-\$25/hr)		<input type="checkbox"/> Laid Off
End Date:	_____		<input type="checkbox"/> \$50,000-\$74,999 (\$26-\$38/hr)		<input type="checkbox"/> Quit
	(Month/Year)		<input type="checkbox"/> \$75,000 and up (\$39/hr and up)		<input type="checkbox"/> Still working here

EMPLOYER 4

Employer:	_____		Your job title:	_____	
Hours/week:	_____	Salary:	<input type="checkbox"/> Less than \$29,999 (\$15/hr or less)	Reason for leaving:	<input type="checkbox"/> Fired
Start Date:	_____		<input type="checkbox"/> \$30,000-\$49,999 (\$16-\$25/hr)		<input type="checkbox"/> Laid Off
End Date:	_____		<input type="checkbox"/> \$50,000-\$74,999 (\$26-\$38/hr)		<input type="checkbox"/> Quit
	(Month/Year)		<input type="checkbox"/> \$75,000 and up (\$39/hr and up)		<input type="checkbox"/> Still working here



ADDITIONAL SERVICES

You may be eligible for additional services through our partner agencies. If you specify that you are interested in a service listed below, the associated agency will contact you with more information. Representatives from the agencies listed below do not work for DuPage County and cannot provide you with an update on the status of your application with the workNet DuPage Career Center.

Do you want someone from College of DuPage (COD) to contact you about:	<input type="checkbox"/> English As A Second Language classes <input type="checkbox"/> How to get your GED <input type="checkbox"/> The certificate and training programs they offer
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Do you want someone from the Illinois Division of Rehabilitation Services (DHS) to contact you about employment and training programs for people with disabilities?	<input type="checkbox"/> Yes
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Do you want someone from the Illinois Department of Employment Security (IDES) to contact you about:	<input type="checkbox"/> Getting a free online job matching account through Illinois JobLink <input type="checkbox"/> Services for Veterans and Spouses of Veterans
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Do you want someone from the Illinois Department of Human Services (IDHS) to contact you about applying for food stamps, Medicaid, or childcare assistance?	<input type="checkbox"/> Yes
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Do you want someone from Community Assistance Programs (CAPs) to contact you regarding employment services for individuals aged 55+?	<input type="checkbox"/> Yes
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IF YOU CHECKED ANY OF THE BOXES ABOVE, PLEASE PROVIDE YOUR NAME, EMAIL ADDRESS, AND PHONE NUMBER.

Full Name

Email

Phone