



CFET Initial Assessment

EAST VALLEY AJCC

HIGH DESERT AJCC

WEST VALLEY AJCC

Customer Name:		Last 4-SSN:	
Phone Number:		Date of Birth	
Email address:			

INSTRUCTIONS: Discuss and complete all questions with customer.

A. General Information:			
1. <u>Employment Goal:</u>			
2. <u>Work History Summary</u> (List experience in months/years, include special skills; examples: 12 yrs. construction, 5 mos. retail sales, etc.):			
3. <u>Education/Training</u> (List diplomas, licenses, certificates, etc. you have achieved. If currently attending school or training, provide details.):			
4. <u>Education:</u>	High School Diploma	GED	None
5. Have you ever served in the US Military?		Yes	No
6. <u>Transferable Skills</u> (List knowledge, skills and abilities; examples: customer service, MS Word, warehouse operations, operate forklift, etc.):			

B. Potential Challenges/Barriers to Employment:	
1. <u>Transportation</u> (Explain your transportation situation; suspended driver's license, own vehicle, use public bus system, walk, bicycle, etc.):	
2. <u>Legal/Court/Convictions</u> (List any misdemeanor/felony convictions, including active parole/probation status if applicable, etc.):	
3. <u>Family/Housing Situation</u> (Do you have a stable place to live?):	
4. <u>Financial/Income</u> (Specify amount and source of income. Examples: \$2,500 mo. wages, \$350 wk. UI, supported by parents, etc.):	
5. <u>Needed Assistance</u> (What resources/services do you need to obtain gainful employment? Examples: resume help, job search assistance, job referral, and/or type of skills upgrade/training):	



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C. Referral:			
1.	Referral To:	AJCC	Education/Training Comments:
D. Release of Information:			
I authorize the Agency/Institution/Individual Provider (Goodwill Industries, Inc.) to receive/exchange information from/about me with the San Bernardino County Department of Workforce Development. I understand that this release will remain in effect until I choose to revoke it. This form was completed in its entirety and was read by me (or read to me) prior to signing.			
E. Signatures:			
Customer Signature: _____		Date: _____	
Advisor Signature: _____		Date Reviewed: _____	

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