

Skills Training Form



Employment and Training

Client Checklist

Participant Name: _____

Start Date _____

PROGRAM NAME	ITEM	DATE	Staff INITIALS
	Application		
	Copy of Status Card		
	Consent Forms		
	Intake Assessment		
	Letter of Intent to Employment & Training		
	High School/Post-Secondary Transcripts and Certifications		
	Personal Budget		
	Acceptance Letter from Training Program or related documents		
	Course information (Name of Institution, start/end dates, etc.)		
	Detailed Course Costs		
	Updated Resume		
	Financial Verification (Pay stub, OW stub, R.O.E.)		
	Employment Action Plan (Meet with Employment Coordinator)		

Please return this checklist with your completed package.