

Welcome to Community Works Project!

You have been referred to Community Works Project by your DHS Family Coach so we can support your journey towards employment and self-sufficiency.

To get started:

1. Please complete this registration & intake packet to allow us to get to know you and better serve you.
2. You will join our in-person Orientation or be asked to watch our Orientation Video online.
3. After orientation and completing this information packet, you will meet with an Employment & Engagement Specialist who will review your forms with you, discuss your goals and next steps.
4. Before you leave, please complete our anonymous online feedback form about your experience today, so we can improve our services.

By signing below, I indicate that I understand the following:

Participation:

- Participation in Community Works Project (CWP) activities has been mandated by my DHS Family Coach.
- I must complete assigned hours or alert my Employment & Engagement Specialist and/or Family Coach if I am unable to do so for any reason.

Contact with CWP:

- I will be contacted regularly by my Employment & Engagement Specialist and possibly other CWP team members to discuss my progress, my attendance, my goals, and for possible referrals to other services. I understand I may also reach out to my Employment & Engagement Specialist or others at CWP as needed.
- I will be contacted by my Employment & Engagement Specialist for up to 3 months after exiting CWP. When I exit CWP for a job, I will be asked to provide information about this new job, and I will be able to contact my Employment & Engagement Specialist or other CWP team members for guidance and assistance in those first three months of employment.

Satisfaction with services:

- I can ask to see the CWP Program Manager if I feel I am being treated unfairly or if I have other concerns that cannot be addressed by my Employment & Engagement Specialist. I may also be asked to complete short anonymous feedback surveys to help CWP improve services.

Information sharing & Referrals:

- CWP is contracted by DHS and as such, shares information regarding its participants with DHS Family Coaches and Managers, as needed.
- CWP is a collaborative project of Immigrant & Refugee Community Organization (IRCO), Human Solutions, Self Enhancement Inc. (SEI), Urban League of Portland, El Programa Hispano Católico, and the Native American Youth And Family Center (NAYA). To receive CWP services, my information is shared within the CWP team.
- I will be asked for permission before CWP refers me for services outside of CWP, to one of the CWP consortium nonprofit agencies or to other service providers.

Signature of Participant

Printed Name

Date

PERSONAL INFORMATION

First Name: _____ Last Name: _____
 Preferred Name: _____ Gender Pronouns: _____
 City of Residence: _____ Zip Code: _____
 Have you participated in CWP before? Yes No Date of Birth: _____

COMMUNICATION METHODS

Cell Phone: _____ Alternate Phone: _____
 Email Address: _____ Best times to reach you: _____
 Preferred Method of Contact: Email Cell Phone (Texts) Cell Phone (Calls) Alternate Phone

DEMOGRAPHIC INFORMATION *(responses do not affect your eligibility to participate in CWP)*

Gender: Male Female Other: _____

Race / Ethnicity (select all that apply):

- African Middle Eastern or North African Slavic
- African American / Black Multi-Racial White
- Asian Native American / Alaskan Native Declined to Answer
- Latino / Hispanic Native Hawaiian / Pacific Islander

Country or Culture of Origin: _____

English Fluency: Yes No Somewhat

Preferred or Native Language: English Other or Additional Preferred Languages: _____

Immigration Status:

- US Born Asylee Other: _____
- Refugee Immigrant

EDUCATIONAL INFORMATION

What is the highest education level you have completed?

- No formal schooling Some High School Vocational Training Bachelor's Degree
- Elementary school High School Diploma Some College Credits Master's Degree or higher
- Middle/Junior High School GED Associate's Degree
- International Degree: _____ Other: _____

Are you currently a student? Yes No

CWP USE ONLY

Employment Specialist: _____ Step: _____ DHS Prime #: _____
 Hours: _____ DHS Case #: _____
 English Language Learner Yes No Start Date: _____ FC: _____
 Rosetta Stone? Yes No End Date: _____ Branch: _____
 CSCD Referral? Yes No Agency: UL NAYA ETO# _____
 Wellness Referral? Yes No _____
 Notes: _____



INTAKE SUPPLEMENTAL

ISSUES THAT MAKE IT DIFFICULT TO LOOK FOR, OR KEEP A JOB

What is preventing you from accessing employment? (select all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Childcare | <input type="checkbox"/> Lack of training / certification | <input type="checkbox"/> Caring for family member with health concerns or disability |
| <input type="checkbox"/> Criminal Background | <input type="checkbox"/> Lack of work experience | <input type="checkbox"/> Family Issues |
| <input type="checkbox"/> Housing | <input type="checkbox"/> Your own health concerns | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Disability | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Lack of education | | |

What modes of transportation do you use? (select all that apply)

- | | | | |
|--|-------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Personal Vehicle | <input type="checkbox"/> Bicycle | <input type="checkbox"/> Motorcycle | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Public Transportation | <input type="checkbox"/> E-scooters | <input type="checkbox"/> Walk | <input type="checkbox"/> Other: _____ |

Do you have:

- a valid Oregon Driver's License? Yes No Unsure
- a current valid Oregon ID? Yes No
- a social security number? Yes No Unsure

Do you have a childcare provider? Yes No. If no, what help do you need? _____

Are you currently receiving services from any of the following agencies? (select all that apply)

- | | | | |
|--|---------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> IRCO | <input type="checkbox"/> Urban League | <input type="checkbox"/> SEI | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Human Solutions | <input type="checkbox"/> NAYA | <input type="checkbox"/> El Programa Hispano | <input type="checkbox"/> Other: _____ |

What other help might you need before going to work? _____

SKILLS AND QUALIFICATIONS YOU HAVE

Skills and Experience you already have (select all that apply):

- | | | |
|--|--|---|
| <input type="checkbox"/> Warehouse/Manufacturing | <input type="checkbox"/> Teaching/Childcare | <input type="checkbox"/> Maintenance/Custodial |
| <input type="checkbox"/> Supervisor/Management | <input type="checkbox"/> Construction/Painting | <input type="checkbox"/> Bilingual/Multilingual |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Customer Service/Retail | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Non-Profit | <input type="checkbox"/> Driving/Transportation/Delivery | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Office/Clerical | <input type="checkbox"/> Food Service | |
| <input type="checkbox"/> Computer Technology | <input type="checkbox"/> Healthcare/Caregiving | |

Qualifications you already have (select all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Commercial Driver's License (CDL): <input type="checkbox"/> Current <input type="checkbox"/> Expired | <input type="checkbox"/> Military Experience |
| <input type="checkbox"/> Forklift Certification: <input type="checkbox"/> Current <input type="checkbox"/> Expired | <input type="checkbox"/> Job Corps |
| <input type="checkbox"/> CPR Certification: <input type="checkbox"/> Current <input type="checkbox"/> Expired | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> First Aid Certification: <input type="checkbox"/> Current <input type="checkbox"/> Expired | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Certified Nursing Assistant (CNA): <input type="checkbox"/> Current <input type="checkbox"/> Expired | |

Technology you use:

- Do you know how to use a computer? Yes No
- Do you have access to a computer? Yes No
- Do you have access to a smartphone? Yes No
- Do you have an iMatch account? Yes No Unsure



INTAKE SUPPLEMENTAL

EMPLOYMENT HISTORY

Current employment status:

- Employed part time
- Not employed and seeking employment
- Not employed and not seeking employment
- Unable to work

When did you last work? (paid and/or unpaid) _____

Why did you leave your last job? _____

Describe your work experience (paid and/or unpaid): _____

GOALS & EMPLOYMENT PREFERENCES

What do you want to accomplish or change while we are working together? _____

Are you looking for full time or part time? Full time Part time

Shifts Available: Morning Afternoon Evening Nights Weekdays Weekends

What type of job are you looking for (select all that apply)?

- Warehouse/Manufacturing
- Supervisor/Management
- Landscaping
- Non-Profit
- Office/Clerical
- Computer Technology
- Teaching/Childcare
- Construction/Painting
- Customer Service/Retail
- Driving/Transportation/Delivery
- Food Service
- Healthcare/Caregiving
- Maintenance/Custodial
- Other: _____
- Other: _____

What type of work environment are you most comfortable with (select all that apply)?

- Fast-paced
- Lots of standing
- Lots of sitting
- Lots of local driving
- Lots of travel (out of town)
- Lots of time on the phone
- Individual work
- Teamwork
- Customer-oriented
- Little customer contact
- Work from home
- Canvassing / work outdoors
- Other: _____
- Other: _____

How far from your primary area of residence are you willing to travel for a job? _____

What are the nearest cross-streets for your residence? _____

Have you defined long term career goals? Yes No. If yes, what are they? _____

Would you be interested in training opportunities to help you meet your career goals? Yes No

If CWP offered it, would you be interested in receiving job opportunities / information via social media? Yes No

If yes, which would you prefer to use for your job search?

- Facebook
- Twitter
- Instagram
- LinkedIn

What other information do you think would be helpful?

