



Cincinnati – Hamilton County

A proud partner of the American Job Center network

REGISTRATION

DATE: _____

*** Required Fields**

Last Name: *		First Name: *		
SSN: *		Date of Birth: * / /		Gender:
Address: *				Homeless: <input type="radio"/> YES <input type="radio"/> NO
City: *	State: *	Zip Code: *	County: *	
Phone: * ()		Email:		
PLEASE CHECK ALL THAT APPLY				
Race: *	<input type="radio"/> American Indian	<input type="radio"/> Asian	<input type="radio"/> White	<input type="radio"/> Other
	<input type="radio"/> Native Hawaiian/ Other Pacific Islander	<input type="radio"/> Black/ African-American		<input type="radio"/> Did Not Declare
Ethnicity: *	<input type="radio"/> Hispanic or Latino	<input type="radio"/> Not Hispanic or Latino		<input type="radio"/> Did Not Declare
Employment Info:	Employed: <input type="radio"/> YES <input type="radio"/> NO	Current/Most Recent Employer:		
Dislocated Worker Status: *	<input type="radio"/> Terminated/Laid Off	Employer:		<input type="radio"/> Self-Employed
	<input type="radio"/> Plant Closure	Employer:		<input type="radio"/> Never been Employed
	<input type="radio"/> Military Spouse	<input type="radio"/> Displaced Homemaker		
UI Status: * (Unemployment Insurance)	<input type="radio"/> Currently receiving UI benefits	If so, what State:	<input type="radio"/> Have Exhausted UI benefits	<input type="radio"/> Not receiving UI benefits
Refugee Assistance amount \$ <input type="radio"/> YES <input type="radio"/> NO	SSI amount \$ <input type="radio"/> YES <input type="radio"/> NO	SSDI amount \$ <input type="radio"/> YES <input type="radio"/> NO	SNAP amount \$ <input type="radio"/> YES <input type="radio"/> NO	TANF/OWF amount \$ <input type="radio"/> YES <input type="radio"/> NO
Family Size:	Subsidized Housing? <input type="radio"/> YES <input type="radio"/> NO			
Highest Education Level: *	<input type="radio"/> Did not Complete High School	<input type="radio"/> High School Diploma/ GED	<input type="radio"/> Some College, No Degree	<input type="radio"/> Associate Degree/ Technical Degree
	<input type="radio"/> Bachelor's Degree	<input type="radio"/> Graduate Degree	<input type="radio"/> Current High School Student	<input type="radio"/> Current College Student
Current Trade/Vocational Training or Skills: *	<input type="radio"/> No Trade/ Vocational Training	<input type="radio"/> Some Trade/ Vocational Training	<input type="radio"/> Trade Vocational Certificate or License	<input type="radio"/> Additional Training
Citizenship: <input type="radio"/> US Citizen	<input type="radio"/> Registered Alien	<input type="radio"/> Other Legal Alien	<input type="radio"/> Refugee	<input type="radio"/> Other
Veteran Details:	Are You an Armed Forces Veteran? * <input type="radio"/> YES <input type="radio"/> NO	Is Your Spouse A Veteran? * <input type="radio"/> YES <input type="radio"/> NO	Are You On Active Duty? <input type="radio"/> YES <input type="radio"/> NO	Branch & Dates:
	I Have A Service Connected Disability Rated by the VA at %			
Are You Registered with SELECTIVE SERVICE? (Applies to males born after 12/31/1959) <input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> EXEMPT				
Do You Have a Disability? <input type="radio"/> YES <input type="radio"/> NO		Primary Language:		
Do you have a criminal Record? <input type="radio"/> YES <input type="radio"/> NO		Criminal Record Dates:		

WORK HISTORY

Starting with most recent job:

EMPLOYER	JOB TITLE	START	END	WAGE	CERTIFICATE ENDORSEMENT SKILLS	REASON FOR SEPARATION
				\$		
				\$		
				\$		
				\$		
				\$		

PURPOSE FOR TODAY'S VISIT:

EMERGENCY CONTACT NAME AND PHONE NUMBER: