Individual Employment Plan (IEP)

WIOA Dislocated Worker

An Individual Employment Plan (IEP) will be developed for all Adult and Dislocated Worker participants. The Individual Employment Plan is a process developed by the participant and career advisor. Assessment results, supportive service needs, identified barriers and the steps to address them, along with goals and timelines are recorded on the IEP Form and signed by the customer and the career advisor. As the barriers are addressed and benchmarks measuring progress toward goals are met, accomplishments are recorded in the Achievement Objectives portion of the IEP until the participant achieves the final attainment of employment.

INDIVIDUAL EMPLOYMENT PLAN (IEP)					
Name	Date				
Date of Unemployment	Highest Level of Education				
Reason for Unemployment					

Initial Services Received Indicate the services received by the customer				
Initial Assessment	Outreach, Intake and Orientation			
Resume and/or Interviewing Assistance	Unemployment Insurance Info			
Career Assessment/Career Research	Employment/Labor Market Info			
Info on Supportive Services/Follow-up	Other			
Rapid Response				

SECTION I - CAREER ASSESSMENTS					
Indicate the type(s) of a	ssessments the custo	omer has completed and the date of	the assessment		
Aptitude & Ability Test CareerScope	Date	Counselor's Report in File Assessment Report to client How to get Most out of CareerScope to Client	Date (reviewed w/client)		
Interest Inventory CareerScope	Date	CScope Interest Areas 1.	Date		
2.					
3.					
www.livecareer.com	Date	Livecareer: RIASEC (circle three)	Date		

Interpretation of Assessment(s)						
Interpret test results and make appropriate service recommendations						
Assessment Results Interpretation/Recommendation						

SECTION II – GOALS AND OBJECTIVI Identify participant's employment	VES goals and the associated skills/train	ing required (be specific)
Employment Goal		Date
Justification for Employment Goal		
Supplemental Individual Employm	nent Dian	
PART 1 – Please answer the questi	ons below about your goals for trair	
PART 2 – Complete the Training Pr found at the end of this document		arket Research Form and the List of Jobs forms
Please explain why you believe that	nt you have been unable to find a jo	b
What kind of job would you like fo	r your next job to be and why	
If you are unable to obtain your fir	st choice job, what job would be yo	ur second choice and why
What is the minimum wage you wi	ill accept on your next job?	per hour
In what county or area do you pref	er to work?	
How far are you willing to commut	re? miles one way	
	ch methods do you plan to use in or	employment if you are approved for training in der to gain employment at these companies?
Provide a financial plan on how yo	u will cupport yourself and your fam	nily while you are in training and during your
job search (be specific)	u wiii support yoursell allu your fall	my write you are in training and during your

	ning Required to Achiev		nd customer's cur	rent skill level in required area
Skill/Training Requirement		Indicate whether customer possesses required skill(s) and level of proficiency		
Computer	Computer Skills			
Industry Sp	pecific Training			
Other				
			ogical order (mos	t recent first) (Attach Resume)
Dates	Duration (yrs/mos)	Employer/Job Title		List primary skills acquired
SECTION IV	/ – EMPLOYMENT ASSE	TS		
Bi-Multili	ngual (List languages sp	ooken and proficiency)	Software/Co proficiency)	mputer Programs (List programs and
Transfera O*Net GCIS	able Skills (List based on	customer perception ar	nd any assessmen	ts)

Professional (Certificat	es/Licens	ses (List expiration	on dat	es if applical	ble)		
						·		
Other								
Other								
Describe how ic	lentified	emplovn	nent assets will c	ontrib	oute to custo	mer's succes	ss in desired occupa	tion
		op.o,					. с	
1								
SECTION V – SK	ILL ASSE	SSMENT	Assess Basic & O	Occup	ational Skills	T		
Location	Skill(s)		Testing	Pre	-test	Date	Post-test	Date
	Assesse	ed	Instrument					
Interpretation	of Chill v -	5055m 5 = =	+(c)				1	
Interpretation of	JI SKIII AS		u(s)					
Assessment		Results			Interpretat	tion/Recomm	nendation	
					ı			
SECTION VI – EI	DUCATIO	NAL BAF	RRIERS – Identify	assoc	ciated service	e needs		
Barrier			Solution(Comments	
Basic Skills D								
Math – Belov								
Rasic Skille D	Racio Skills Deficient							

Reading – Below 9.0

No High School Diploma/GED						
	T SKILLS/WORK-READINESS NEEDS Ide	· · · · · · · · · · · · · · · · · · ·				
Skill	Service Recommendation/Referral	Date Provided				
Interviewing Skills						
Resume Writing						
Networking Skills						
Personal Branding						
SECTION VIII – OCCUPATIONAL BARRI	ERS Identify associated service needs					
Barrier	Solution(s) Identified	Comments				
Long-term Unemployed						
Improve Job-Seeking Skills						
Limited/No Work Experience						
Needs Occupational Skills Training						
Skilled in Declining Industry						
Language Barrier						
Needs Assistive Technology						
Other						
Other						
Other						
CECTION IV. Continue D	-t-F	un Idantifi th				
	et Employment Goals/Overcome Barrie					
combination of services for the participant to achieve the employment goals (be specific) Service 1: Additional Services						
Initial Assessment						
Resume and/or Interviewing Assistance						
Assessment Comprehensive/Specia	alized					
Info on Supportive Services/Follow-up						

Outreach, Intake and Orientation		
Rapid Response		
Unemployment Insurance Info		
Employment/Labor Market Info		
	Target Date Start	Target Date End
Service 2: Intensive Services		
Counseling and career planning		
Short-term prevocational services		
GED/HS Diploma		
Work Experience/Internship		
Justification for Intensive Services		
Service 3: Job Search Assistance		
Individual Job Search		
Out of Area Job Search		
Justification for Job Search Assistance		
Service 4: Training Services/Employment Related Education		
Occupational skills training		
Skills upgrade/retraining		
Entrepreneurial training		
Combined workforce training & related instruction		
Required training-related materials/supplies		
ABE/literacy combined with training		
Training-related materials/supplies		
Apprenticeships		
Customized training		
On-the-job training		
Justification for Training Services		

SECTI	ON Y SUDDORT SEE	NICES NE	FDS — Access all it	oms for	assistance the indivi	dual may r	need to succe	ccfully
					ed and identify solution		icca to sacce	331ully
1.	Housing	2.	Food/clothing	3.	Transportation	4.	Job Related	Materials
5.	Medical/Health	6.	Child/Family Care	7.	Uniform(s)	8.	Other (Spec	cify)
RESO	URCES SOLUTIONS	IDENTIFII	ED					
Identi	fied Solution	Prov	rided by who/whe	n/what			Start Date	End Date
OTHE	R SERVICES:		ACHIFV	FMFNT	OBJECTIVES			
	Objective							Ctoff
	Objective		Date		Objective O	uccome		Staff Initials
Jo	bSmart Workshop							
Ва	asic Skill Levels							
Co	ompleted Course In	crement						
Co	ompleted Semester	•						
Co	ompleted Semester	•						
Co	ompleted Semester	•						

Externship

Objective	Date	Objective Outcome	Staff Initials
Graduated			
Certification Exam			
Entered Employment			



TRAINING PROGRAM RESEARCH

Customer:			Date:
INSTRUCTIONS: This worksheet will help you gather infeis best for you, complete a column for each of the program can include: (1) resource materials in the one-stop cente	ns that you are considering. Try to use	as many resources as possible when c	ompleting this form. Available resources
carrinolade: (1) recourse materiale in the one clop conte	Provider: Program:	Provider: Program:	Provider: Program:
How long has the training provider been providing this type of training? When does the next class or set of classes begin? When is the application deadline? What are the program's entry requirements?	Trogram.	Trogram.	Trogram.
(feel free to attach school/program info) What is the program's typical class size?			
What percentage of applicants are usually accepted?			
How long does it take to complete?	# weeks/months/years	# weeks/months/years	# weeks/months/years
Program Structure	# of qtrs/semesters# classes per qtr/semester# hours per week day/evening/weekend/flexible	# of qtrs/semesters# classes per qtr/semester# hours per week day/evening/weekend/flexible	# of qtrs/semesters# classes per qtr/semester# hours per week day/evening/weekend/flexible
How much does it cost to attend the program?	\$ tuition and fees per # of qtrs/sem = \$ total cost Other costs \$ books \$ supplies \$ tools \$ uniforms \$ testing and licensing exams	\$ tuition and fees per # of qtrs/sem = \$ total cost Other costs \$ books \$ supplies \$ tools \$ uniforms \$ testing and licensing exams	\$ tuition and fees per # of qtrs/sem = \$total cost Other costs \$ books \$ supplies \$ tools \$ uniforms \$ uniforms \$ testing and licensing exams
Are there other sources of financial aid available?	Pell HOPE Other	Pell HOPE Other	Pell HOPE Other

	Provider:	Provider:	Provider:
	Program:	Program:	Program:
What instruction methods are used?	% instructor lead	% instructor lead	% instructor lead
	% individual paced, self-	% individual paced, self-	% individual paced, self-
	directed, or computer aided	directed, or computer aided	directed, or computer aided
Are evening and/or weekend classes offered?			
What degrees or certificates do students			
receive upon program completion?			
What percentage of students actually	% Graduation rate	% Graduation rate	% Graduation rate
graduate?			
What types of jobs do graduates typically get?			
What types of businesses tend to employ			
graduates?			
What are the average starting wages of			
graduates?			
What are the average starting benefits of			
graduates?			
What job placement assistance is provided by	Placement staff	Placement staff	Placement staff
the vendor?	Job Order Leads	Job Order Leads	Job Order Leads
	None	None	None
Does the program have job leads for people			
who have completed the training, but lack			
related job experience?			
What do students tend to like and dislike			
about the program?			
How far is the program from your home?	# miles each way	# miles each way	# miles each way
	minutes commute	minutes commute	minutes commute
Will your car or transportation/ride plan get			
you to and from school reliably?			
Are your reading and math skills at or above			
the required level for this program?			
Do assessment results (Career Scope,			
ProveIT, etc.) indicate you are a good match			
for this training program?			
Is this training a match for your learning style?			
Will you need to change your child care			
arrangements if you attend this program?			
Can you work out a new affordable child care			
plan while you attend this program?		-	
Other positive and negative considerations			

LABOR MARKET RESEARCH



ivame:	Date:	_INSTRUCTIONS: This worksheet will hel	p you	C . D	C	
her information about potential jobs available after you complete training for the occupation you have chosen. To help you decide				nat vvork		
which program is best for you, complete a form	for each of the programs that you	u are seriously considering. Collect inform	nation on a			
minimum of 8 jobs that you would be qualified				rksheet. If you a	are compa	aring more
than one similar program, but with the same tar						
additional forms for each target job. Use these	worksheet(s) to narrow your train	ning and job interests. Try to use as many r	esources as possi	ble when comple	ting this fo	orm.
Available resources include: (1) GCIS, (2) visits	s to the prospective programs, an	d (3) interviews with persons currently work	king in related jobs	, ONET, America	's Job bar	nk, Georgia
Department of Labor, internet job search websit	tes, industry websites, business v	websites, etc.				
Vendor:	Program:		Comments an	d Information		
Job Target after training (i.e. secretary, tr	uck driver, etc.) Be as specific	c as possible				
Salary range for someone with your work e	xperience Low \$	High \$ Average \$	No	experience \$ _		
Are there currently jobs available for peop	le (like yourself) who have con	npleted the training, but do not have				
work experience in the area of training in yo	our county or commuting distar	nce?				
Are there currently jobs available for peop	le (like yourself) who have con	npleted the training, and have similar				
work experience? Identify minimum qualific	cations you currently have rela	ited to the job. Example: 2 years				
general office	,	, , ,				
Are there jobs available for someone like yo	ou if you finish the program, bu	ut are unable to pass certification				
exams and/or obtain an industry license?						
Does your research seem to indicate there						
Does your research seem to indicate if ther	e are many qualified applicant	s with more skills and work				
experience competing for entry level jobs in	ı your job target area?					
Are there jobs available in your county or co						
Is there on-going job growth and/or projected	ed demand in your targeted job	o area?				
Do assessment activities you completed (C						
for your targeted job?	·	, ,				
Will your targeted job meet your financial ol	oligations and wage expectation	ons?				
Select three of the jobs you like best. Label you		bb #2 and Job #3. Tell us more specific info	ormation about the	se jobs and ident	ify why th	ey are a
good fit for your interests, current work experier	nce and new skills after training.					
Job #1 Title:						
Company:		Wage: \$		_	_	_
Experience Requirements:		Rate your current work experie	nce for this job:	□ exceeded	□ met	□ weak
		5.	41.1.1			
Education Requirements:		Rate your current education for	this job:	□ exceeded	⊔ met	⊔ weak
Job #2 Title:		\\\				
Company:		Wage: \$		_	_	_
Experience Requirements:		Rate your current work experie	nce for this job:	□ exceeded	□ met	□ weak
E1 (1 B)		5.	41.1.1			
Education Requirements:		Rate your current education for	tnis jod:	□ exceeded	⊔ met	⊔ weak
Job #3 Title:		14 /				
_ Company:		Wage: \$		_	_	
Experience Requirements:		Rate your current work experie	nce for this job:	☐ exceeded	□ met	□ weak
Education Requirements:		Poto vour ourrent advantion for	this ish:		□ mat	□ wook
Euucalion Requirements.		Rate your current education for	ແ ແຈ ງບນ.	□ exceeded	∟ 111€t	□ weak

List of 20 Jobs Applied For Over Past Three Months

Name

Job Title	Date Applied	Name of Company	Address or Email
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

I have participated in the development of my Individual Employment Plan (I activities in which I will participate and what I am responsible for in order to that achievement of these goals may be dependent upon the availability of understand that the IEP is not a guarantee or contract to provide services.	achieve my planned goals. I am aware
Participant's Signature	Date
Staff Signature	 Date