ILLINOIS DEPARTMENT OF EMPLOYMENT SECURITY

FOR OFFICE USE ONLY
Initials of Reviewing Manager: _____
Referred to: ES ☐ Vet Rep ☐
Is the Veteran registered in IJL:
YES ☐ NO ☐

U. S. Military Veteran's Information and Assessment Form

~All fields MUST be completed~

Purpose: *To provide better and more directed employment services for veterans. The information on this form will be kept confidential. IDES staff must complete the Assessment Interview on the back of this form.*

PRINT CLEARLY

Date: _____

Name: _____ **SSN:** _____-_____-_____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____- _____

Phone: (_____)_____ **E-Mail:** _____

1. Circle your branch of service and indicate the type of duty:

   Branch of Service: **Army / Marines / Navy / Air Force / Coast Guard**

   Type of Duty: Active / Reserve / National Guard

2. Dates of **ACTIVE** Military Service - From ____/____/_____ To ____/____/_____
   ~as noted on your DD-214 / 215~ MM / DD / YY MM / DD / YY

3. Is your military discharge - DISHONORABLE?	**Yes**	**No**
4. Do you have a "**VA Service-Connected"** disability rating of 0% or above, or were you released from the military with a **medical discharge**? Rating _____%	**Yes**	**No**
5. Have you plead **guilty** to or been convicted of a criminal offense other than a minor traffic violation?	**Yes**	**No**
6. Are you **staying** at a shelter, or do you **need** shelter?	**Yes**	**No**
7. Do you want an Employment Specialist to contact you? If **YES**, I prefer to be contacted via: **Phone** ☐ **Mail** ☐ **E-Mail:** ☐	**Yes**	**No**

Assessment Record

*(**STOP** - For Agency Use ONLY)*

Name of Person conducting the Assessment: _____

Date: _____ Time: _____

How was this Assessment conducted: In-Person ☐ Telephone ☐

Assessment Interview. *Ask the Veteran,* "What is your purpose for visiting the "Employment Office" today?

Notes: _____

_____

_____

_____

_____

Summary of Assessment Interview *(Be specific and do not use assumptions)*:

Gold Card Eligible: *(Sep 11, 2001 – Present)*	
Computer Skills:	
Military Experience:	
Branch of Service – Job Title – Rank – Deployed - Combat Zone	
Education:	
Military & Civilian	
Licenses & Transportation	
Work Preference:	
Type of Work – Shift - Relocation	
Barrier(s) to Employment	