

Name _____
Chart Number _____
Start of Care _____

VIP Intake Form

DD214 ___ yes ___ no Job Referral ___ yes ___ no
Housing Referral ___ yes ___ no Resume ___ yes ___ no
Recently Separated ___ yes ___ no Stand Down ___ yes ___ no
Disabled ___ yes ___ no Special Disability ___ yes ___ no
Chronic Homelessness ___ yes ___ no Homeless Letter ___ yes ___ no
Economic Advantage ___ yes ___ no Campaign Badge ___ yes ___ no

Wars That Have Participated In

Operation Iraqi Freedom ___ yes ___ no
Operation Enduring Freedom ___ yes ___ no

Barriers to Employment (Please check all that apply)

___ Criminal Background ___ Health Issues ___ Alcohol Problems
___ Life Skills ___ Transportation ___ Drugs ___ Homeless
___ Depression ___ Lack of Skills ___ Childcare ___ Drivers License
___ No ID (Social Security Card, Birth Certificate) ___ Psychological Issues

I am prepared to display experience in the following areas:

___ Custodian ___ Forklift Operator ___ Warehouse Management
___ Customer Service ___ Cook/ Culinary ___ Paralegal ___ Accounting
___ Security ___ General Labor ___ Construction ___ CDL Driver
___ Hotel Manager ___ Warehouse ___ Dry Wall ___ Plumbing
___ Electrical ___ Assembler ___ Mechanic ___ Computer
___ Telemarketing ___ HVAC ___ Clerk ___ Bartender ___ Barber
___ Other