

1 Review each section, and place an X in the box to select any and all current needs.

**Job Search**

- Resume Advice
- Interview Advice
- Job Search Advice

**Training**

- Vocational Training to gain a specific skill
- Adult Education (GED/ESL)
- Citizenship Preparation
- Literacy/Numeracy Tutoring
- Job-focused Training for young adults (ages 16-26)

**Career Assistance for Special Groups**

(Select all that apply to you!)

- I'm a veteran.
- I'm a job seeker that is at least 55 years old.
- I'm in need of legal assistance.
- I have a disability.
- I'm a CHA resident.
- My job was outsourced to another country.
- I'm interested in mentoring youth through coaching.

**Other Needs**

- Computer Skills
- Food Pantry
- Food stamps (TANF/SNAP Benefits)
- Shelter/Rental Assistance

1 Review each section, and place an X in the box to select any and all current needs.

**Job Search**

- Resume Advice
- Interview Advice
- Job Search Advice

**Training**

- Vocational Training to gain a specific skill
- Adult Education (GED/ESL)
- Citizenship Preparation
- Literacy/Numeracy Tutoring
- Job-focused Training for young adults (ages 16-26)

**Career Assistance for Special Groups**

(Select all that apply to you!)

- I'm a veteran.
- I'm a job seeker that is at least 55 years old.
- I'm in need of legal assistance.
- I have a disability.
- I'm a CHA resident.
- My job was outsourced to another country.
- I'm interested in mentoring youth through coaching.

**Other Needs**

- Computer Skills
- Food Pantry
- Food stamps (TANF/SNAP Benefits)
- Shelter/Rental Assistance

2 Answer the questions below.

Full Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Today's date is: \_\_\_\_\_  
 Who gave you this form?  
 \_\_\_\_\_

This section is **only** for referrals through a partner program.

Full Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Today's date is: \_\_\_\_\_  
 Who gave you this form?  
 \_\_\_\_\_

3 Submit!

There are three ways to submit this form. Please choose the most convenient option for you.

- ▶ Slip into the referral form box!
- ▶ Fax to: 312.994.8352
- ▶ Email to: PilsenReferrals@NationalAble.org

Questions? Call 312.994.8390

2 Answer the questions below.

Full Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Today's date is: \_\_\_\_\_  
 Who gave you this form?  
 \_\_\_\_\_

This section is **only** for referrals through a partner program.

Full Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Today's date is: \_\_\_\_\_  
 Who gave you this form?  
 \_\_\_\_\_

3 Submit!

There are three ways to submit this form. Please choose the most convenient option for you.

- ▶ Slip into the referral form box!
- ▶ Fax to: 312.994.8352
- ▶ Email to: PilsenReferrals@NationalAble.org

Questions? Call 312.994.8390



National Able Network®

855.994.8300  
[www.NationalAble.org](http://www.NationalAble.org)

# Job Seekers and Program Partners!

Assistance for job seekers is available at NO COST through National Able Network and our program partners!

Get started by completing sections 1, 2, and 3 inside this booklet.



National Able Network®

855.994.8300  
[www.NationalAble.org](http://www.NationalAble.org)

# Job Seekers and Program Partners!

Assistance for job seekers is available at NO COST through National Able Network and our program partners!

Get started by completing sections 1, 2, and 3 inside this booklet.

