



Kankakee Workforce Services
An Illinois **WORKNet** Center

A proud partner of the AmericanJobCenter network

How may we help you?

Today's date: _____

Last name: _____

First name: _____

Address: _____

City/ZIP: _____

Primary phone: _____

E-mail: _____

Are you a returning customer? Yes No

Do you have an appointment today? Yes No

Are you a veteran? Yes No

Do you have a high school diploma or GED/equivalent? Yes No

Are you currently working? Yes No

Are you homeless? Yes No

Do you need any accommodations? Yes No

What brings you here today? (Check all that apply)

Was told to come here

Transportation

Help with healthcare

Help with utilities

Filing for unemployment

Training assistance

Illinois Joblink

Child care

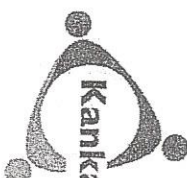
Food assistance

Housing assistance

Looking for a job

Attend workshop

Resource room



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Partner Referral Form

Participant Name: _____

Address: _____

Cell/Home Phone # _____ / _____ / Email _____

Referral agency:

Organization _____ / Contact name _____

Email _____ Phone # _____ Date _____

Referral to:

- WIOA Adult, Dislocated Worker & Youth Program IDES Wagner – Peyser, UI, TRA, MSFW
- IDES Veterans Job Counseling Adult Education & Family Literacy Vocational Rehabilitation
- TANF Perkins Community Services Block Grant (KCCSI) Senior Community Services Employment Program (KCCSI)
- Other (please specify) _____

Organization Name: _____

Organization Address: _____

Contact Name _____ Email _____

Phone # _____

Reason for referral:

If applicable:

TABE score(s) _____(R) _____(M) / TABE grade level(s) _____(R) _____(M)

Date of test: _____ TABE Locator/test scores attached: Yes No

Participants Goals

Instructions for participant

- _____ Contact the department you are referred to for an appointment.
- _____ Bring a copy of this referral form and any other relevant documents to your appointment.

I hereby consent to the exchange and/or release of my confidential information to the Kankakee Workforce Services Center's partner agencies.

_____/_____
Signature of participant **Date**