Workforce Innovation and Opportunities Act  
Policy 01-19

To: Local Workforce Development Boards (LWDBs),  
   Chief Elected Officials, Regional Executive Directors  
From: WorkForce West Virginia  
Subject: Empowered Employment Pilot Program  
Effective Date: June 1, 2019  
References: WIOA Section 134(a)(3)(A)(x)  
           WIOA Regulations Section 682.210

GENERAL INFORMATION
West Virginia has multiple characteristics that impact the available labor pool for employers located in the state. The following are examples of barriers that limit the ability to find even temporary or part time employment which in turn, serves as a deterrent to individuals seeking or finding long term employment and/or developing a career path.

- West Virginia has a low labor participation rate of 53.3%
- Poverty and lower education levels serve as barriers to employment
- Rural nature of the majority of the state hinders employment opportunities
- Drug / opioid use and related criminal charges / incarceration history
- Indirect impact of drug / opioid use or incarceration of family member(s)
- Targeted population with limited or no work experience
- Targeted population with “job hopping” work history indicating challenges with retaining employment

To assist in overcoming these barriers, WorkForce West Virginia has initiated a pilot program, entitled Empowered Employment Pilot Program. The Empowered Employment pilot is designed to assist individuals in obtaining a time-limited work experience that is wage-paid, subsidized up to 100%, and is in the public, private, or non-profit sectors.

These jobs are designed to enable an individual to establish a work history, demonstrate work success in an employee-employer relationship, and develop the skills that lead to unsubsidized employment. Empowered Employment Job activities must be combined with comprehensive career and supportive services provided prior to, or concurrently with, the Empowered Employment Job activity.

PROGRAM DESIGN
WorkForce West Virginia proposes to offer funding to local Workforce Development Boards in West Virginia to operate Empowered Employment activities in their local areas. In the event that a local WDB chooses not to operate an Empowered Employment program in their region, WorkForce West Virginia reserves the option to identify a community organization in that area to operate the Empowered Employment program.

The goal of the program is to place individuals into work experience opportunities, allowing the participant to develop work skills. In addition, through support services from WorkForce WV, partner and community organization, the participant will have the resources to identify solutions to other potential barriers to employment, such as financial stability, dependable transportation, and child care.
PROGRAM GUIDELINES

The following provides information on the minimum requirements/elements for Empowered Employment Jobs. Program operators may include additional elements in their procedures, as long as they are in conformance with this policy, the WIOA, DOL Regulations, and State guidelines.

PARTICIPANT ELIGIBILITY REQUIREMENTS

In addition to meeting general eligibility requirements for the WIOA program, the participant must also have: (1) one or more barriers to employment; and (2) be chronically unemployed or have an inconsistent work history. These eligibility requirements must be documented in the participant file.

1. Barriers to Employment - For the purpose of participant eligibility for Empowered Employment Job activities, barriers to employment include one or more of the following:
   - Low-income individuals
   - Individuals with disabilities
   - Ex-Offenders
   - Homeless individuals
   - English Language Learners
   - Displaced Homemaker
   - Secondary School Drop out
   - Basic Skills Deficient
   - Individuals participating in recovery activities for substance abuse
   - Individuals impacted by drug / opioid use or incarceration of a family member.

2. Chronically Unemployed or Inconsistent Work History - For the purpose of participant eligibility for Empowered Employment Job activities, individuals are considered to be chronically unemployed or to have an inconsistent work history when they meet one or more of the following criteria:
   - Has never held a full-time job (30+ hours per week) for more than 13 consecutive weeks
   - Has been fired from a job within the 12 months prior to application
   - Has held more than three jobs in the 52 weeks prior to application’s on parole or probation, or has been released from prison/jail within the 12 months prior to application
   - Has been unemployed for the 13 consecutive weeks prior to application
   - Has been unemployed for 15 or more of the 26 weeks prior to application

   In addition to including documentation of an individual’s eligibility under items 1 and 2 above, the Program Operator must include the Empowered Employment pre-screening eligibility document in the participant file (Attachment A).

Program Operators shall attempt to obtain documentary evidence or utilize a collateral contact to document the items marked on the summary sheet and may only utilize an applicant statement when attempts to collect documentary evidence or a collateral contact were unsuccessful or are not practicable within a reasonable period of time.
PROVISION OF EMPOWERED EMPLOYMENT SERVICES

Participants who have a qualifying barrier to employment, and who are chronically unemployed or have an inconsistent work history, may participate in Empowered Employment Job activities.

All eligible participants must first undergo an appropriate assessment and develop, with the assistance of a Program Operator staff member and/or WorkForce WV career advisor, an Individual Employment Plan (IEP) that includes the rationale for an Empowered Employment Job.

The Empowered Employment Job must be accompanied by comprehensive career and supportive services delivered prior to and concurrently with the Empowered Employment Job. Supportive service needs shall be identified during the assessment process, with potential solutions/resources outlined in the IEP. Specific services are individualized and based on the preferences, choices, and needs of the client.

The appropriate mix of career services shall also be outlined in the IEP and must include, at a minimum, at least one of the following individualized career services:

- Career Planning
- Group and/or Individual Counseling
- Short-term Prevocational Services (including soft skills training)
- Workforce Preparation Activities
- Financial Literacy Services
- Out-of-Area Job Search Assistance and Relocation Assistance
- English language acquisition and integrated education and training programs

Delivery of career services should continue through the duration of the Empowered Employment Job activity, including evaluation of or changes to support services. Contact should be a minimum of weekly during the early stages of the Empowered Employment activity, gradually decreasing to monthly. The services may be delivered by WorkForce WV Career Advisors, Program Operator staff, or by a partner agency.

No other services are required prior to Empowered Employment beyond the Career Services outlined above. However, training services such as Individual Training Accounts or On the Job Training may be provided during or after completion of Empowered Employment activities if part of the individual employment plan and if the participant meets all requirements for that service, including that the ITA and/or OJT training be in a demand occupation. Participant must also complete drug screening if required for additional training services.

Empowered Employment Jobs shall be developed, to the extent practicable, with a work site in an industry that is of interest to the participant. It is anticipated that most Empowered Employment Jobs will be entry level positions, and the participant shall be paid the same wages as other entry level positions at the Empowered Employment worksite but not less than Federal or WV minimum wage, whichever is greater.

Eligible participants may participate in up to 26 weeks of Empowered Employment Job activities, delivered over a maximum period of 52 weeks. The participant may be placed with more than one work site during the Empowered Employment Job activity, but the total number of weeks for a participant may not exceed 26 weeks. (Maximum and minimum hours of work per week to be determined.)
Participants will be required to sign an agreement (Attachment B) outlining the expectations and requirements during the Supported Employment activity.

**BUSINESS SERVICES ACTIVITIES**

Business service staff will work with program participants, in coordination with career advisors, to identify potential work sites. Businesses will be made aware of the Empowered Employment program during routine visits by Business Services staff, including the potential of coordinating Empowered Employment with On the Job Training and Apprenticeship opportunities when appropriate. Note: Additional training opportunities such as OJT and apprenticeship must meet additional requirements including demand occupations and drug screening. WIOA reimbursement for these programs may only apply to skills gaps remaining based on an evaluation of the participant’s knowledge of the occupation, including skills learned during Empowered Employment.

**WORK SITE REQUIREMENTS**

Work sites willing to work with participants in Empowered Employment activities may be from the private for-profit sector, the private non-profit sector, or the public sector. Empowered Employment Jobs are structured to help participants achieve success in the workplace and develop the skills needed to obtain and retain unsubsidized employment. Work sites must be able to provide supervision and appropriate feedback to the participant at regular intervals during the course of the activity.

Work sites should understand that the goal of the Empowered Employment program is to assist the participant in developing work-related skills which may require a mentoring aspect in addition to routine supervision activities. Issues such as attendance, tardiness, poor communication, problems following directions, etc. should be reported to the Empowered Employment staff for counseling and guidance.

Work sites must also be willing to participate in the required on-site monitoring visits conducted by Program operator staff to evaluate the participant’s performance. Monitoring will be a minimum of monthly and more often if needed.

There is no expectation that the work site will retain the participant at the completion of the Empowered Employment Job. However, if the employer is interested in hiring the participant after the Empowered Employment Job activity has been completed, and additional training is needed, an OJT may be developed that follows requirements of the OJT funding source.

WorkForce WV requires a written, signed agreement (Attachment C) between a Program Operator representative and a qualified work site prior to the start of Empowered Employment activities. A short agreement will also be needed signed by Participant, Work Site, and Program Operator (Attachment D) to confirm specifics of the proposed work assignment.

**MONITORING**

Program Operators shall monitor on-site at least once each calendar month during the Empowered Employment Job period. An increased emphasis on communication / monitoring is expected during early weeks of participant’s work assignment. All monitoring results must be documented in the participant’s file and retained by the Program Operator.
This on-site monitoring shall include not only an evaluation of soft skills, but an evaluation of occupational skills listed in the job description/training plan that is incorporated into the Worksite Agreement. (Attachment E)

Work Force WV will monitor Program Operators for compliance with this Empowered Employment policy.

**FISCAL AND REPORTING REQUIREMENTS AND PROCESSES**

Local Workforce Development Boards will be provided the opportunity to submit proposals / requests which outline the need for Empowered Work within their area, including the proposed number of participants to be served and projected expenses.

Funds will be available to LWDBs through processes that are already in place, following WorkForce West Virginia fiscal policies and processes.

Program Operators will be required to submit quarterly reports to WorkForce West Virginia on a format to be developed.

**PROHIBITIONS**

Agreements shall not be entered into with employers of a business or part of a business that has relocated from any location in the United States, until such company has operated at the new location for 120 days, if the relocation resulted in any employee losing her/his job at the original location.

Participants may not be employed in an Empowered Employment Job involving political activities.

Participants may not be employed in an Empowered Employment Job that directly or Indirectly assists, promotes or deters union organizing.

Participants may not be employed in an Empowered Employment Job involving the construction, operations, or maintenance of that part of a facility which is used for religious instruction or worship (sectarian activities).
EMPOWERED EMPLOYMENT PILOT PROGRAM
POLICY ATTACHMENTS

Attachment A Eligibility and Pre-Screen Documentation
Attachment B Participant and Program Operator Agreement
Attachment C Worksite and Program Operator Agreement
Attachment D Participant, Worksite, and Program Operator Agreement
**SECTION I BARRIERS TO EMPLOYMENT**  
(Must meet at least one)

- Low Income
- Disability
- Ex-offender
- SNAP Participant
- Homeless
- Ex-offender Recovery
- TANF Participant
- Displaced Homemaker
- Secondary School Dropout
- Basic Skills Deficient
- Impacted by drug/ or incarceration of a family member

**SECTION II**  
**CHRONICALLY UNEMPLOYED OR INCONSISTENT WORK HISTORY**  
(Must meet at least one)

- Has never held a full-time job (30+ hours per week) for more than 13 consecutive weeks
- Has been fired from a job within the past 12 months
- Has had 3 or more jobs in the past 12 months
- Is on parole or probation or has been released from prison / jail within the past 12 months
- Has been unemployed for the past 13 weeks
- Has been unemployed 15 of the past 26 weeks

**SECTION III**  
**ADDITIONAL POTENTIAL BARRIERS**  
(Discuss answers with your career advisor)

Do you have reliable transportation? _____  
Do you have child or dependent care issues? _____  
Do you have housing needs? _____  
Are you able to pass a background check? _____  
Can you pass a drug screen? _____  
Do you have any medical issues that will impact your employment? _____
This agreement is between the work experience participant and the Empowered Employment Jobs Program Operator. It outlines the responsibilities of all parties in the operation and participation in a work experience opportunity offered by the Program Operator.

Empowered Employment Job Participant Information

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Program Operator Information

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<th>5. Program Operator Address:</th>
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Training Information

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<td>8. Wage:</td>
<td>9. Start Date:</td>
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10. Projected Work Schedule

11. Approximate End Date:

Projected Number of hours and / or weeks of activity

The Empowered Employment pilot is designed to assist individuals in obtaining a time-limited work experience that is wage-paid and subsidized, and is in the public, private, or non-profit sectors for those individuals with barriers to employment who are chronically unemployed and have inconsistent work histories.

These jobs are designed to enable an individual to establish a work history, demonstrate work success in an employee-employer relationship, and develop the skills that lead to unsubsidized employment. Empowered Employment Job activities must be combined with comprehensive career and supportive services provided prior to, or concurrently with, the Empowered Employment Job activity.

Work Experience Participant Agreement:

I agree to:
- Develop an employment plan with a workforce representative, based on an evaluation of the educational and work-related goals.
- Complete an Empowered Employment Jobs Work Experience orientation with Program Operator
- Report to work as scheduled and complete all Empowered Employment hours
- Follow all company policies and procedures
- Participate in monitoring visits in person or by phone
- Participate in career coaching and career services activities up to 8 hours per week.
• Put forth my best efforts to acquire all necessary skills and to fulfill all work requirements.
• Report the actual hours worked on the provided timesheet. (Overtime, holiday pay or sick time are not authorized or accrued)
• Communicate with work site supervisor and workforce representative regarding progress, problems, tardiness, absences, or any time away from the work site.
• Notify your workforce representative immediately if there are concerns regarding the work experience placement.
• Immediately report any personal work accidents or injuries to the worksite supervisor and workforce center representative.
• Complete a work readiness evaluation periodically during the work experience to determine competency levels upon completion.

Workforce Representative Agreement for Work Experience:

• Develop an employment plan with the participant, based on an evaluation of the educational and work-related goals.
• Assess and identify any initial supportive services, educational needs, stipends and/or incentives anticipated throughout the work experience and incorporate those activities into the employment plan.
• Provide participant orientations for the work experience participant that describe and explain the expectations of the work experience opportunity.
• Negotiate the job duties, wages, timeframe and expectations of work experience opportunity.
• Maintain regular contact with the participant, in order to provide necessary counseling and address the needs of all parties.
• Review the completed timesheets for accuracy and consistency for all authorized hours worked.
• Provide a payroll schedule to participant and worksite supervisor.
• Review the performance evaluation of the participant completed regularly as part of the work experience, as defined within this agreement.
• Monitor and evaluate the worksite, work activities, and performance of participant and worksite to ensure that defined activities are completed, and that applicable labor laws are followed.

Agreement Signatures: I agree with the information provided within this agreement and will comply with all requirements.

________________________________________  __________________________
Worksite Signature                              Date

________________________________________  __________________________
Participant Signature                           Date
Position Details:

Work Experience Job Title: __________________________________________

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<th>Description of work activities and tasks to be performed</th>
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**Worksite and Supervisor’s Responsibilities for Empowered Employment Program:**

- Accept for work experience a participant who does not have all the skills necessary to successfully perform the job.
- Train the participant in the area identified through the training outline, through a structured approach, monitor progress of participant and contact WFWV immediately with performance issues.
- Define and negotiate the work activities, work hours, timeframe and wages for the participant, based on the attached job description.
- Complete an Empowered Employment Work Experience orientation with Program Operator.
- Provide the participant with an orientation to the rules, procedures and regulations of the worksite.
- Provide sufficient tasks (as defined within the attached job description) to occupy the participant during work hours.
- Review and provide feedback to the workforce representative on the progress and performance of the participant, including routine formal participant evaluations.
- Notify workforce representative of any problems or circumstances that could potentially lead to an early termination of the contract.
- Sign off and verify that that participant actually worked the recorded hours on the timesheet.

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**Attachment C**

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<th>Worksite Information</th>
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<td>1. Name of Work Site:</td>
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<td>FEIN Number:</td>
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<td>2. Phone Number:</td>
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<td>E-mail:</td>
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<td>Address:</td>
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<tr>
<td>3. Supervisor for Empowered Employment Activity:</td>
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<th>Program Operator Information</th>
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<tr>
<td>4. Program Operator Contact Name:</td>
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<td>5. Program Operator Contact Information:</td>
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<td>Phone Number</td>
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<td>6. Program Operator Address:</td>
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1900 Kanawha Blvd. East * Building 3 Suite 300 * Charleston, WV 25305

An agency of the Department of Commerce
An equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.

www.workforcewv.org
A proud partner of the AmericanJobCenter network
• Ensure that the participant maintains the designated work schedule, within the defined time frame. Participants are not allowed to accrue overtime, sick leave, or holiday pay.
• Report any work accidents or injuries related to the participant to the workforce center representative.

Worksite Assurances and Certifications:
• Be in compliance with all appropriate state and federal tax requirements (WC, UI, etc.)
• Comply with the regulations defined in the Fair Labor Standards Act, as well as any other pertinent federal, state, and local employment laws.
• Adhere to all regulations relating to anti-discrimination and equal opportunity.
• Adhere to provisions related to the avoidance of sexual harassment
• Ensure the safety for all parties involved, as it relates to the work activities and the overall work experience opportunity.
• Program participants engaged in a paid work experience through WIOA services should not unfavorably impact current employees from employment opportunities.
• Participants in a paid work experience must not be employed to carry out the construction, operation, or maintenance of any part of a facility that is intended for sectarian instruction or as a place for religious worship.

Workforce Representative Responsibilities for Empowered Employment Program
• Provide Empowered Employment orientation for the worksite supervisor and to describe and explain the expectations of the work experience opportunity.
• Assist worksite supervisor and participant in filling out any and all documentation needed.
• Negotiate the job duties, wages, timeframe and expectations of work experience opportunity.
• Maintain regular contact with the worksite supervisors and the participant, in order to provide necessary counseling and address the needs of all parties.
• Review the completed timesheets for accuracy and consistency for all authorized hours worked.
• Provide a payroll schedule to participant and worksite supervisor.
• Review the performance evaluation with worksite supervisor of the participant completed regularly as part of the work experience, as defined within this agreement.
• Monitor and evaluate the worksite, work activities, and performance of participant and worksite to ensure that defined activities are completed, and that applicable labor laws are followed.
• The Program Operator is responsible for paying for or reimbursing worksite for wages and related costs for participants in the Empowered Employment Program.

Agreement Signatures: I agree with the information provided within this agreement and will comply with all requirements.

______________________________
Worksite Signature

______________________________
Program Operator Signature

______________________________
Date

______________________________
Date
Job Title: ____________________________________________________________

Description of work activities and tasks to be performed % of time

1. ________________________________________________________________
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TIME SHEET SIGNATURE CARD

Worksite (business/employer) Name _________________________________

Worksite Street Address _________________________________________

Worksite City, State, Zip Code _________________________________

The supervisor or designee is responsible for reviewing the timesheet to ensure accuracy in recording total hours worked, along with providing information on progress. Time sheets must be signed by one of the authorized signatures below.

Supervisor Name (Print or Type) _________________________________

Supervisor Signature __________________________________________ Date ______

Supervisor Designee Name (Print or Type) __________________________

Designee Signature ________________________________________ Date ______
This agreement is between the worksite, the work experience participant and the Empowered Employment Program Operator. It outlines the responsibilities of all parties in the operation and participation in a work experience opportunity offered by the Program Operator.

### Empowered Employment Participant Information

<table>
<thead>
<tr>
<th>1. Name of Empowered Employment Participant</th>
<th>2. Participant Phone Number: E-mail:</th>
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### Worksite Information

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<tr>
<th>3. Name of Empowered Employment Work Site: FEIN Number:</th>
<th>4. Worksite Representative and Title:</th>
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<th>5. Phone Number: E-mail: Address:</th>
<th>6. Supervisor for Empowered Employment Activity:</th>
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### Program Operator Information

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<th>7. Program Operator Contact Name:</th>
<th>8. Program Operator Contact Information: Phone Number E-mail</th>
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<th>9. Program Operator Address:</th>
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### Training Information

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<tr>
<th>14. Projected Work Schedule</th>
<th>15. Approximate End Date: Projected Number of hours and / or weeks of activity</th>
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Agreement Signatures: I agree with the information provided within this agreement and will comply with all requirements.

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<th>Worksite Signature</th>
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<th>Program Operator Signature</th>
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For each area listed, check the letter that best describes the participant's overall work on the job. Discuss your answers with the participant. Use this form as a tool to help the participant identify strengths and areas of improvement.

Please use the following for rating the participant's performance:
A = Exceptional; exceeds expectations  
B = Meets average expectations  
C = Meets minimum expectations  
D = Does not meet expectations  
Please provide comments if the participant receives a rating lower than a C.

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<tr>
<th>Work Habits:</th>
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<td>B</td>
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<td>D</td>
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Additional Comments:

Supervisor ___________________________  Participant Signature ___________________________

Supervisor Title ___________________________  Date ___________________________