



# Workforce Innovation and Opportunity Act (WIOA) Pre-Application Form

Please right click the county you reside in to send them an email

Referral Source: \_\_\_\_\_  
Referral Date: \_\_\_\_\_

Kenosha County

Racine County

Walworth County

PLEASE PRINT CLEARLY IN INK:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Education

Are you attending school?  Yes  No  
 If yes, what school? \_\_\_\_\_

Do you have a High School Diploma or equivalent?  Yes  No

Do you have a degree/certificate?  Yes  No  
 If yes, what kind? \_\_\_\_\_

### Work

Are you employed?  Yes  No  
 If yes, where/position/wage: \_\_\_\_\_  
 If no, where/when was the last time you were employed: \_\_\_\_\_

Were you laid off/terminated or is the company closing or did it close?  Yes  No  
 If yes, from where/when: \_\_\_\_\_

Are you collecting Unemployment Benefits?  Yes  No  
 If yes, how much/since when? \_\_\_\_\_

Are you an English Language Learner?  Yes  No  
 If yes, what is your primary language: \_\_\_\_\_

Are you a Veteran or currently active in the Service?  Yes  No  
 Dates: \_\_\_\_\_

Do you have a disability?  Yes  No

Are you a spouse of a Veteran?  Yes  No

Are you a child of a Veteran killed in active duty?  Yes  No

### Family/Living Arrangement

Household Members & Income (last 6 months)      What is the family size? \_\_\_\_\_

	Name	Relationship	Age	Income	Source	Income	Source
1.		<b>SELF</b>					
2.							
3.							
4.							

### Income

Do you meet one or more of the following?

- |   |  |
|---|--|
| <input type="checkbox"/> FoodShare          | <input type="checkbox"/> LLSIL Guidelines    |
| <input type="checkbox"/> W2 (TANF)          | <input type="checkbox"/> Homeless            |
| <input type="checkbox"/> Free/Reduced Lunch | <input type="checkbox"/> SSI/SSDI            |
| <input type="checkbox"/> Probation/Parole   | <input type="checkbox"/> Other (list): _____ |

Signature \_\_\_\_\_

Date \_\_\_\_\_

The Workforce Development Center is an equal opportunity service provider. In order for us to serve you better, please notify us ahead of time if you need assistance to access services, need material in an alternate format or need it translated to another language. You may request these services by contacting your local EEO officer.