

# COMPANY NAME & Number

## Worker Survey

All information from this survey is strictly confidential. Individual results will be analyzed for re-employment, retraining assistance, and research purposes only.

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Last day of work: \_\_\_\_\_ *If exact date not known, please select a range below.*  
 within 30 days     within 90 days     within 180 days     Unknown  
 within 60 days     within 120 days     more than 180 days

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Contact Phone: (    ) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Personal Email: \_\_\_\_\_

Gender:  Male     Female    Age Range:  18-21     22-35     36-49     50-64     65+

Are you a veteran?  Yes     No

Is your spouse a veteran?  Yes     No     Not married     Surviving Spouse

*If yes, is your spouse currently serving in the armed forces?*  Yes     No

### Highest Grade in School Completed (*Choose one below*):

- |   |   |
|---|---|
| <input type="checkbox"/> Did Not Complete High School | <input type="checkbox"/> Associate Degree     |
| <input type="checkbox"/> High School Diploma / GED    | <input type="checkbox"/> Undergraduate Degree |
| <input type="checkbox"/> Some College, No Degree      | <input type="checkbox"/> Graduate Degree      |

### Trade / Vocational Training or Skills (*Choose one below*):

- No Trade/Vocational Training
- Some Trade/Technical School, No Certificate
- Trade/Vocational Certificate or Licensure (*Please specify*): \_\_\_\_\_
- Additional Training (*Please specify*): \_\_\_\_\_

Current or Most Recent Job Title: \_\_\_\_\_

What is your rate of pay? \$ \_\_\_\_\_  Hourly     Salary    (*Choose one of the following ranges*)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Under \$9.25 / Under \$19,240           | <input type="checkbox"/> \$14.50 - \$18.24 / \$30,160 - \$37,959 | <input type="checkbox"/> \$28.75 - \$35.99 / \$59,800 - \$74,879 |
| <input type="checkbox"/> \$9.25 - \$11.49 / \$19,240 - \$23,919  | <input type="checkbox"/> \$18.25 - \$22.74 / \$37,960 - \$47,319 | <input type="checkbox"/> \$36.00 - \$45.24 / \$74,880 - \$94,119 |
| <input type="checkbox"/> \$11.50 - \$14.49 / \$23,920 - \$30,159 | <input type="checkbox"/> \$22.75 - \$28.74 / \$47,320 - \$59,799 | <input type="checkbox"/> \$45.25 and over / \$94,120 and over    |

### Average number of hours worked per week? (*Choose one range*)

- |   |   |
|---|---|
| <input type="checkbox"/> Less than 20 hours | <input type="checkbox"/> 35-40 hours        |
| <input type="checkbox"/> 20-31 hours        | <input type="checkbox"/> More than 40 hours |
| <input type="checkbox"/> 32-34 hours        |   |

### How many full years of service do you have with this company? (*Choose one range*)

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Less than 1 year | <input type="checkbox"/> 5 to 9 years   | <input type="checkbox"/> 15 to 19 years | <input type="checkbox"/> 25 to 29 years   |
| <input type="checkbox"/> 1 to 4 years     | <input type="checkbox"/> 10 to 14 years | <input type="checkbox"/> 20 to 24 years | <input type="checkbox"/> 30 or more years |

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**What is the maximum number of miles you are willing to commute one-way for employment? (Choose one)**

- 10 or less      20      30      40      50 or more

**Would you be willing to relocate for an employment opportunity?**

- Relocate within the state?      Relocate to neighboring states?      Relocate nationwide?  
 Yes     No       Yes     No       Yes     No

**What are your future employment plans? (Choose all that apply)**

- |  |   |
|--|---|
| <input type="checkbox"/> Seek employment immediately ( <i>same job type</i> )<br><input type="checkbox"/> Full-time <input type="checkbox"/> Part-time | <input type="checkbox"/> Seek employment immediately ( <i>new job type</i> )<br><input type="checkbox"/> Full-time <input type="checkbox"/> Part-time |
| <input type="checkbox"/> Already have a job lined up   | <input type="checkbox"/> Retirement/leaving the workforce   |
| <input type="checkbox"/> Start my own business   | <input type="checkbox"/> Obtain additional certification  |
| <input type="checkbox"/> Attend school/training  | <input type="checkbox"/> Undecided  |
|  | <input type="checkbox"/> Other ( <i>Please specify</i> ): _____<br>_____  |

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**Would you like individual assistance with any of the following? (Choose all that apply)**

- |  |   |
|--|---|
| <input type="checkbox"/> Finding out what jobs are available                         | <input type="checkbox"/> Paying moving expenses                           |
| <input type="checkbox"/> Understanding how my skills & experience relate to new jobs | <input type="checkbox"/> Budgeting & paying my bills without a job        |
| <input type="checkbox"/> Deciding what jobs I can do                                 | <input type="checkbox"/> Helping my family through this current situation |
| <input type="checkbox"/> Learning how to find a new job                              | <input type="checkbox"/> Deciding which school would be best for me       |
| <input type="checkbox"/> Developing a résumé   | <input type="checkbox"/> Tuition & books                                  |
| <input type="checkbox"/> Filling out job applications                                | <input type="checkbox"/> Paying for child care while I go to school       |
| <input type="checkbox"/> Dealing with my loss of employment                          | <input type="checkbox"/> Transportation expenses to & from school         |
| <input type="checkbox"/> Other ( <i>Please specify</i> ): _____                      |   |

**What training or education would you be interested in? (Choose all that apply)**

- |   |  |
|---|--|
| <input type="checkbox"/> Reading skills training  | <input type="checkbox"/> Finishing/Obtaining a GED/High School Equivalency |
| <input type="checkbox"/> Math skills training   | <input type="checkbox"/> Finishing/Obtaining an Associate Degree           |
| <input type="checkbox"/> Writing skills training  | <input type="checkbox"/> Finishing/Obtaining an Undergraduate Degree       |
| <input type="checkbox"/> Basic computer skills training   | <input type="checkbox"/> Finishing/Obtaining a Graduate Degree             |
| <input type="checkbox"/> Finishing/Obtaining a Trade/Vocational Certificate or Licensure ( <i>Please specify</i> ): _____ |  |
| <input type="checkbox"/> Other ( <i>Please specify</i> ): _____   |  |
| <input type="checkbox"/> Unsure   |  |
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