

New Jersey Department of Education

Vocational Profile

This Vocational Profile is a tool for documenting and structuring functional information about a student with disabilities that is important for anyone who will be helping the student to obtain and keep integrated employment in the community. This tool provides a framework for recording information such as the student’s preferences and needs for a job, endurance and physical capabilities, general work performance, mobility and transportation needs/options, general community skills, social skills, personal care needs/skills, personal networks for job development, and previous work history information including preferences about jobs. This information can be used *before the student begins working at a job* to evaluate and customize the match between a student and a potential job. All students with disabilities that want to work in the community, including students with the most support needs, can successfully work in the community when they receive needed services and supports, including assistance with choosing a job that is well matched to the student.

In addition to helping match a student to a potential job, the information contained in this Vocational Profile can be used to develop statements of the students’ strengths, interests and preferences in the transition section of their Individualized Education Programs and can contribute to the information collected for age-appropriate transition assessment.

A copy of this completed Vocational Profile should be shared with other agencies that the student is being referred to such as the New Jersey Division of Vocational Rehabilitation Services (NJDVRS), the New Jersey Division of Developmental Disabilities (NJDDD), and supported employment providers.

This tool should be completed by individuals who know the student (e.g. student, parent, teacher, job coach, coworker, friend, etc.) and have had the opportunity to observe the student perform a variety of activities in work, home and community settings. It is important to keep this information current by reviewing and updating it as often as is needed.

Date of Profile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Completed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_

Current School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home School District (if different from above) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Citizenship ❑ U.S. ❑ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Financial benefits ❑ SSI ❑ SSDI ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_

Payee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_

**Date(s) provided by**

|  |  |  |  |
| --- | --- | --- | --- |
| Student has received the following  **Pre-Employment Transition Services**: | **School** | **NJDVRS** | **NJCBVI** |
| 1. Job exploration counseling |  |  |  |
| 1. Work-based learning experiences |  |  |  |
| 1. Counseling about opportunities for enrollment in programs at institutions of higher education |  |  |  |
| 1. Workplace readiness training to develop social skills and independent living skills |  |  |  |
| 1. Instruction in self-advocacy |  |  |  |

Student has been determined eligible to receive services from the following agencies:

* NJDCF Children's System of Care  NJDDD  NJDVRS  NJCBVI
* NJ Transit Access Link  County Paratransit System  Child Protection and Permanency
* Mental Health Agency  Center for Independent Living
* Other
* Other

I. Preferences and Needs

# 1. Preferred Schedule:

(Number of hours per week)

❑ 2-10 ❑ 31-40 ❑ Weekends Okay

❑ 11-20 ❑ 40+ ❑ Evenings Okay

❑ 21-30

Current regularly scheduled activities or appointments that may interfere with employment

Event Time/Day

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Comments:

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# 2. Preferred Characteristics of Job:

❑ Focus on quantity vs. ❑ Focus on quality/detail

❑ Interact with same people vs. ❑ Interact with different people everyday

❑ Teamwork vs. ❑ Independence

❑ Judgment vs. ❑ Routine

❑ Repetition vs. ❑ Variability

Comments:

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# 3. Preferred Atmosphere of Company:

❑ Noisy vs. ❑ Quiet

❑ Frequent social interaction vs. ❑ Infrequent social interaction

❑Busy vs. ❑ Slow, down time possible

❑ Structured vs. ❑ Flexible

❑ Professional attire vs. ❑ Casual attire

❑ Outdoors vs. ❑ Indoors

❑ Small, defined areas vs. ❑ Large area or areas

❑ Moderate temperatures vs. ❑ Very hot or cold temperatures

❑ Willing to work outside in snow and rain

Comments:

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II. Endurance and Physical Capabilities

# 4. Strength

❑ Very light lifting (Under 10 pounds)

❑ Light lifting (11-20 pounds)

❑ Medium lifting (21-30 pounds)

❑ Heavy lifting (Over 30 pounds)

Comments

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# 5. Endurance (without a break) Check if never given the opportunity to exceed

❑ 1 hour ❑

❑ 2 hours ❑

❑ 3 hours ❑

❑ Has worked 3 or more

hours without a break

Comments:

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# 6. Arm Extension/Range of Motion

Able to Reach From:

\_\_\_\_ Lowest Point

\_\_\_\_ Highest Point

\_\_\_\_ Left/Right

Comments:

# 7. Hand Use:

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# 8. Head Control:

Comments:

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III. General Work Performance

# 9. Independent Work Rate (No prompts)

❑ Continual fast work rate

❑ Above average/sometimes fast

❑ Average/steady pace

❑ Slow pace

Comments:

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# 10. Attention to Task:

❑ Low supervision required (Can work independently without direct supervision for more than 2 hours)

❑ Medium supervision required (Requires direct supervision at least every 2 hours or less)

❑ A lot of supervision required (Requires direct supervision at least every hour or less)

Comments:

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11. Independent job sequencing: Check if never given the opportunity to exceed

❑ 7 tasks or more in sequence

❑ 4-6 tasks in sequence ❑

❑ 2-3 tasks in sequence ❑

❑ Cannot perform tasks in sequence

Comments:

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# 12. Initiative/Motivation:

❑ Always seeks new work

❑ Waits for directions

❑ Avoids next task

Comments:

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# 13. Adapting to change:

❑ Adapts easily to changes in routine or down time

❑ Adapts with difficulty to change

❑ Rigid routine is required

Comments:

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# 14. Reinforcement Needs:

❑ Frequently required (throughout the day)

❑ Daily

❑ Weekly

❑ Paycheck sufficient

Comments:

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IV. Mobility and Transportation

# 15. Physical Mobility:

❑ Uses wheelchair/ Requires assistance

❑ Uses wheelchair/Independent

❑ Fair ambulation

❑ Full physical ability

Comments:

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# 16. Building Orientation:

❑ Building and grounds

❑ Building wide

❑ Several rooms

❑ Small area only

Comments:

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# 17. Travel Options:

❑ Lift bus/van only

❑ Lift preferred, able to use taxi or other vehicle

❑ Uses Bus/Access Link independently

❑ Uses Bus/Access Link with assistance

❑ Makes own arrangements - transportation is not an issue

Comments:

V. General Community Skills:

# 18. Time Awareness:

❑ Manages time effectively

❑ Responds to environmental cues for activities

❑ Identifies breaks, meals, ...

❑ Requires assistance for time related activities

Comments:

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# 19. Reading:

❑ Fluent reading

❑ Simple reading; 2-3 words at a time

❑ Reads sight words or symbols; 1 word at a time

❑ No reading skills

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# 20. Writing/Note taking:

❑ Fluent note taking Method:

❑ Simple writing/note taking ❑ Paper & pen or pencil

❑ Copies written information ❑ Computer

❑ No writing skills ❑ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# 21. Math:

❑ Multiplication

❑ Division

❑ Simple addition/subtraction

❑ Simple counting

❑ No computational skills

Comments:

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# 22. Academic/Technology Skills:

❑ Calculator ❑ Filing (how):

❑ Making change ❑ Desktop or Laptop Computer Use

❑ Tablet Use ❑ Smart Phone Use

❑ Word Processing ❑ Database/Spreadsheet Use

❑ Audio/Video Production ❑ Digital Photography/Photo Editing

❑ Other:

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VI. Social Skills:

# 23. Mode of Communication:

❑ Verbal

❑ Sign or gestural

❑ Assistive device – Please list device \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Other:

Comments:

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# 24. Communication Function:

❑ Communicates effectively with strangers and co-workers

❑ Communicates basic needs and engages in social conversation

❑ Communicates basic needs only

❑ Requires assistance to communicate

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# 25. Appropriate Social Interaction:

❑ Frequent/varied social interaction

❑ Infrequent/routine social interaction

❑ Rarely interacts/polite and appropriate responses

❑ Rarely interacts appropriately

Comments:

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# 26. Handling Criticism/Stress

❑ Accepts criticism/changes behavior

❑ Accepts criticism/does not change behavior

❑ Dislikes criticism/ reluctantly changes behavior

❑ Withdraws into silence

❑ Resistive/Argumentative

Comments:

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VII. Personal Care:

# 27. Appearance:

❑ Neat/clean/clothing matched

❑ Neat/clean

❑ Unkempt/clean

❑ Poor hygiene

Comments:

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# 28. Independent Self Care:

❑ Independent

❑ Assistance with transfers from wheelchair

❑ Assistance with bathroom use

❑ Assistance with eating

❑ Other assistance required:

Comments:

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# 29. Describe any medical complications or conditions that could impact working in a job.

Does the student have any epileptic seizures? ❑ Yes ❑ No

How frequent? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of last seizure: \_\_\_\_\_\_\_\_\_\_

Are there any physical limitations in terms of work?

History of substance abuse/alcohol:

Does the student have any allergies? ❑ Yes ❑ No

Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Include allergies to medication, food, and other substances)

VII. Personal Networks

# 30. List family members and others such as a guardian, neighbors, and friends who may help the student connect with employers.

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Address/phone # | Employer | Clubs, groups, organizations |
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VIII. Previous Work History Information

1. Company name and address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date started/left:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rate of pay:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job title and responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What did the student **like** about this job? What did the student **dislike** about this job?

2. Company name and address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date started/left: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rate of pay:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job title and responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What did the student **like** about this job? What did the student **dislike** about this job?

3. Company name and address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date started/left:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rate of pay:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job title and responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What did the student **like** about this job? What did the student **dislike** about this job?

4. Company name and address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date started/left:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rate of pay:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job title and responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What did the student **like** about this job? What did the student **dislike** about this job?

5. Company name and address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date started/left:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rate of pay:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job title and responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What did the student **like** about this job? What did the student **dislike** about this job?

6. Company name and address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date started/left:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rate of pay:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job title and responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What did the student **like** about this job? What did the student **dislike** about this job?