# **ULEAD ISS**



Participant Name:	Date:			
DOB:	Service Dates:			
Address:	Phone:			
Email:	Staff:			
STRENGTHS, SKILLS & GIFTS				
What do you like to do in your spare time?				
What kinds of things are you interested in learning?				
Testing				
TABE Score				
Other Assessment Score				
GOALS & SU	PPORTS			
Case Management (Required)				
Program Element				
Details:				
Program Element				
Details:				

## PERSONAL GOAL(S)

Short-Term or Long-Term?
Strengths Used to Help Achieve this Goal(s)
Potential Barriers to Accomplishing this Goal(s)
WIOA Supports Approved to Support this Goal(s)
Program Element
Details:
Program Element
Details:
Program Element
Details:
Other Supports (housing, food, mental health, etc.) Referrals Required
How will we know when this goal(s) is accomplished?
Estimated Date of Goal Accomplishment  Actual Date of Goal Accomplishment

## **EDUCATIONAL GOALS**

Short-Term or Long-Term?
Strengths Used to Help Achieve this Goal(s)
Potential Barriers to Accomplishing this Goal(s)
WIOA Supports Approved to Support this Goal(s)
Program Element
Details:
Program Element
Details:
Program Element
Details:
Other Supports (housing, food, mental health, etc.) Referrals Required
How will we know when the goal(s) is accomplished?
Estimated Date of Goal Accomplishment
Actual Date of Goal Accomplishment Credential Received

## **EMPLOYMENT/OCCUPATIONAL GOALS**

Short-Term or Long-Term				
Strengths Used to Help Achieve this Goal(s)				
Potential Barriers to Accomplishing this Goal(s)				
WIOA Supports Approved to Support this Goal(s)				
Program Element				
Details:				
Program Element				
Details:				
Program Elements				
Details:				
Other Supports (housing, food, mental health, etc.) Referrals Required				
How will we know when the goal(s) is accomplished?				
Estimated Date of Goal Accomplishment Actua	al Date of Goal Accomplishment			

## Career Pathway Bridge Mapping Tool: Use www.mynextmove.org to complete

What I am Starting With	Interest Profiler Results:  Realistic  Investigative  Artistic  Social  Enterprising  Conventional  Current Job Interest:  —  Future Job Interest:	Is this a Bright Outlo career?  Yes N School options:	Career Pathway:	My Long-term Goal:	
Education History:	Work Experien	ce and Volunteer:	Strengths & Support:	Networks:	

#### **Youth and Case Manager Agreements**

#### For Youth - I agree to:

- -Contact my Case Manager monthly or as often as necessary to update my progress on this plan. I understand that my case can be closed if I go 90 days without participating in a service.
- -Let my Case Manager know of any problems which would cause changes to any activities or interfere with completing the plan.
- -Seek, accept and maintain supports to accomplish my planned goal(s) as stated above.
- -Contact my Case Manager when I become employed or complete an educational program, and provide all necessary information pertaining to the job.
- -Stay in contact with my Case Manager for up to a year after exiting the program to maintain and support meeting my goals.

#### For the Employment Guidance Counselor - I agree to:

- -Assist with the appropriate career guidance, training and supportive services.
- -Coordinate with other agencies and programs to help you obtain needed services.
- -Monitor your participation and progress in the activities above.
- -Assist you in your search for employment.
- -Maintain contact with you for up to one year after you obtain employment for employment retention and career advancement purposes.

Youth Signature	Date					
EGC Signature	Date					
ISS Updates (including Credential Attainment, Job Retention, MSGs, etc.)						
Update	Date	Participant Initials				
Update	Date	Participant Initials				
Update	Date	Participant Initials				
Update	Date	Participant Initials				