

This screener applies to applicants of the Adult and Dislocated Worker programs per Administrator Memo 16-06.

Basic Skills Deficiency Screener

Customer Name: _____

Today's Date: _____

Customer PIN: _____

- 1) Do you have a high school diploma, General Education Development (GED) certificate or High School Equivalent (HSE) certificate? Yes No
- 2) Can you follow basic written instructions and diagrams with no or some assistance? Yes No
- 3) Can you complete basic medical forms or job applications? Yes No
- 4) Can you add, subtract, multiply and divide with whole numbers up to 3 digits? Yes No
- 5) Can you perform basic tasks on a computer? Yes No
- 6) Is your level of English good enough to get and keep a job? Yes No

Participant Signature: _____

Date Signed: _____

Outcome of assessment *(For case manager use only)*

Was the individual able to complete this questionnaire without assistance? Yes No

If any of the questions on this screening tool have been answered "No," then the individual should be assessed as basic skills deficient.

Is the individual basic skills deficient? Yes No

Case Manager Signature: _____

Date Signed: _____

Case Manager Name: _____