Customer Must Be Registered in NC Works

|  |  |
| --- | --- |
| **Customer Name:** | **Date of Referral:** |
| **Customer Email:** | **Customer Phone:**  |
| **Training Program of Interest:** | **Last four SSN:** |
| **Are You Between 16-24** |  |

**Career Pathway Roadmap**

* ARE YOU UNEMPLOYED or UNDER EMPLOYED? **YES or NO**
* ARE YOU ELIGIBLE FOR UNEMPLOYMENT INSURANCE BENEFITS? **YES or NO**
* ARE YOU A VETERAN? **YES or NO**
* WHAT COUNTY DO YOU LIVE IN? **PERSON VANCE GRANVILLE FRANKLIN WARREN**

**Referred by:**

□ Community College Staff \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Email

□ Career Center Staff \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Email

□ Social Services Agency/CBO Staff \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Email

***\*If you would like to follow up with a Career Advisor about your customer, please include a “Release of Information” form with the customer’s signature.***

**Referral Faxed or Emailed to:**

* **Career Center – Talent Team MBR/Jamie Cunningham** **Jamie.Cunningham@ncworks.gov** **or 919-693-3388 FAX**

**□** WIOA Career Services-Dislocated Worker Enrolled

□ WIOA Career Services – Adult Enrolled

□ DOES NOT qualify for any WIOA Intensive Services

□ Refused Participation in WIOA Intensive Services

□ DID NOT choose to schedule an appointment

**Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Henderson Career Center:** 857 Beckford Drive- Suite G; Henderson, NC 27536 (Phone: 252-438-6129)

**Oxford Career Center:** 111 Hilltop Village; Oxford, NC 27565 (Phone: 919-693-2686)