

PARTICIPANT QUESTIONNAIRE			
Participant Name:			
CalJOBS User ID#		WIOA App ID#	
Agency Name		Case Manager Name	
Interviewer Name:		Date:	

Questions	Comments
<b>Participant Experience</b>	
1. Why did you enroll with the (AJCC/Provider)?	
2. From your first day contacting (AJCC/Provider), how long did it take to get an appointment with a career counselor or case manager?	
3. Did you feel that the staff clearly explained the program and what the next steps would be?	
4. Overall is the program physically and programmatically accessible to you?	
5. How often do you meet with or in contact by a career counselor or case manager?	
a. Did you meet to discuss job interest, employment goals, and assessments that can assist in making career choices?	

Questions	Comments
<p>6. What parts of the program did you think were most useful? (Please circle all that apply)</p>	<ul style="list-style-type: none"> <li>a. Meeting with career counselor or case manager</li> <li>b. Access to computers</li> <li>c. Skills assessment</li> <li>d. Tutoring/study skills <b>(youth program only)</b></li> <li>e. Resume writing</li> <li>f. Job search assistance</li> <li>g. Job interviewing</li> <li>h. Job/internship placement</li> <li>i. Workshops</li> <li>j. Enrolling in school, classroom or apprenticeship trainings</li> <li>k. High school, college or GED prep</li> <li>l. Supportive Services (transportation, work clothing, tools, child care, equipment, books, etc.)</li> <li>m. Financial literacy (opening a bank account, credit score, savings, understanding payroll deductions, etc.) <b>(youth program only)</b></li> <li>n. Leadership or volunteer opportunities</li> <li>o. Mentoring <b>(youth program only)</b></li> <li>p. How to start your own business <b>(youth program only)</b></li> <li>q. Other?</li> </ul>
<p>7. Did you have to pay any fee to any individual/organization for services, including placement received through the program? Y/N</p>	
<p>8. Did the program involve you in political or sectarian activity? Y/N</p>	

Questions	Comments
9. Has anyone informed you about the Non-discrimination and Equal Employment Opportunities policies and procedures during your enrollment? Y/N	
10. Have you experienced any forms or types of discrimination while you are in the program? Y/N	
11. Have you been provided with supportive services? If yes, what types of services you received, such as transportation, work clothing, tools, etc.	
a. If yes, what types of services you received, such as transportation, work clothing, tools, etc.	
12. Please complete if you were provided a job, internship, or OJT:	
a. Did you feel working conditions were safe?	
b. Did you work any overtime?	
c. Were you paid on time?	

Questions	Comments
d. Did taxes get taken out of your check?	
13. Please list jobs or internships you were provided through (career center/program) and amount paid.	<p>_____ Pay Rate _____</p> <p>_____ Pay Rate _____</p> <p>_____ Pay Rate _____</p>
14. Do you feel the staff you interacted with cared about you? Why? Or Why not?	
15. Do you feel your experience with (AJCC/Provider) helped you in your career pathway?	
16. Please tell us how we can improve on your experience or goals? (additional services, opportunities, waiting time, process, etc.)	