

YOUTH INDIVIDUAL SERVICE STRATEGY (ISS)
LOS ANGELES COUNTY WORKFORCE INVESTMENT BOARD
 Los Angeles County Workforce Area (WA)
 Department of Community and Senior Services

PART I – PARTICIPANT BACKGROUND

SECTION 1: PERSONAL DATA (All items must be answered)

1. Name: _____ Date: _____
 (Please Print) Last First M.I.

2. Street Address: _____ 3. City: _____ 4. State: _____ 5. Zip: _____

6. Home Phone: () _____ 7. Message Phone/Contact: () _____

8. Birthdate: _____ 9. Age: _____ 10. Gender: Male Female

11. Supervisorial District: _____

SECTION 2: EMPLOYMENT & EDUCATION HISTORY

EMPLOYMENT HISTORY

12. Complete Work History As Applicable:

From	To	Job Title	Hourly Wage	Duties/Skills (Be as specific as possible)

EDUCATION HISTORY

YOUNGER YOUTH (14-18)

13. Currently in School: Yes No
 a) If YES, Grade Level: _____
 b) If NO, Highest Grade Completed: _____ c) Number of Credits _____

14. Secondary School Name: _____

15. Address: _____

OLDER YOUTH (19-21)

16. Diploma/GED Obtained Yes No
17. Post-Secondary School/Trade School: _____
18. Address: _____
19. Area of concentration: _____
20. Degrees, Licenses, Certifications Earned (List each one by type and name of school):

PART II – INTERESTS AND SKILLS INVENTORY

BASIC SKILLS INVENTORY

21. **Basic Skills Proficiency (Check if tested at Below 8.9 Grade Level):** *Check as the appropriate box*
 Not Applicable: Client does NOT require basic skills remediation
 Basic Skills Remediation Required for: Reading Writing Math Other: _____
22. **Pre-Test Level:**
a) Name of Testing Agency: _____
b) Name of Test Given: _____ c) Level Tested At: (R) _____ (W) _____ (M) _____
Other: _____
23. **Post-Test Level:**
a) Name of Testing Agency: _____
b) Name of Test Given: _____ c) Level Tested At: (R) _____ (W) _____ (M) _____
Other: _____

INTEREST/ACTIVITIES

- | 24. Client likes to work with: | A lot | Somewhat | A Little | Not at All |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| • People | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Data/Numbers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Things/Tools | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Other: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

25. Client is Good At (Skills / Hobbies & Interests):
- _____
- _____

CAREER GOALS

26. What Client Would Like to Learn / Short Term Goals:

_____	_____
_____	_____
_____	_____

27. Occupations Client is Interested In / Long Term Career Goals:

_____	_____
_____	_____
_____	_____

FACTORS SUPPORTING SELECTION OF CAREER GOALS

28. Check as appropriate:

	Yes	No		Yes	No
Vocational Interest/Preference	<input type="checkbox"/>	<input type="checkbox"/>	Availability of Jobs (On Demand List)	<input type="checkbox"/>	<input type="checkbox"/>
Sufficient Aptitudes	<input type="checkbox"/>	<input type="checkbox"/>	Motivation	<input type="checkbox"/>	<input type="checkbox"/>
Work History/Prior Training	<input type="checkbox"/>	<input type="checkbox"/>	Educational Competency/History	<input type="checkbox"/>	<input type="checkbox"/>
Temperament	<input type="checkbox"/>	<input type="checkbox"/>	Work Values	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____					

CAREER INFORMATION

29. Client has participated in these career awareness activities:

- Research on careers
- Experienced a personal interview
- Investigated/attended ROP classes for job preparation
- Prepared resume/personal essay
- Other: _____

PART III – TRACK CHARACTERISTICS

BARRIERS TO EMPLOYMENT

30. Check as applicable:

<input type="checkbox"/> Basic Skills Deficient	<input type="checkbox"/> At Risk of Dropping Out
<input type="checkbox"/> Limited or No English	<input type="checkbox"/> High School Dropout
<input type="checkbox"/> One Year Below Age/Grade	<input type="checkbox"/> Youth with disabilities, including learning disabilities
<input type="checkbox"/> Homeless/ Runaway, or Foster Youth	<input type="checkbox"/> Family Receives Public Assistance
<input type="checkbox"/> Pregnant/Parenting Youth	<input type="checkbox"/> Other: _____ (ie. Barriers from 6 th Eligibility Definition)
<input type="checkbox"/> Offender/Ward of the courts	

TRACK CHART: CHARACTERISTICS/SERVICES/OUTCOMES

31. (a) Track Characteristics – check the appropriate Track Characteristics
 (b) Possible Services – check as applicable
 (c) Planned WIA Outcomes – check as applicable

NOTE: Ages 19-21, high school graduates, basic skills efficient, should be referred to the One-Stop

31(a) TRACK CHARACTERISTICS		
Track A (ages 14-18)	Track B (ages 14-21)	Track C (ages 14-21)
<ul style="list-style-type: none"> <input type="checkbox"/> In-School Youth (not high school graduate) <input type="checkbox"/> May be Basic Skills Deficient <input type="checkbox"/> Minimal Barriers (2 or less) <input type="checkbox"/> Lack Work Experience 	<ul style="list-style-type: none"> <input type="checkbox"/> Primarily In-School Youth who attend Alternative Education Schools - OR - <input type="checkbox"/> Has High School Diploma but still basic skills deficient (out of school youth) <input type="checkbox"/> One or More Grade Levels Behind <input type="checkbox"/> Limited or no English <input type="checkbox"/> Pregnant/Parenting Teen <input type="checkbox"/> Offender 	<ul style="list-style-type: none"> <input type="checkbox"/> Primarily Out-of –School Youth (No Formal Linkage to any Educational Institution) - OR - <input type="checkbox"/> Might be In-School but serious educational deficiencies or behavioral problems <input type="checkbox"/> Drop-out <input type="checkbox"/> Limited or no English <input type="checkbox"/> Lack High School Diploma/GED <input type="checkbox"/> Has High School Diploma but is Basic Skills Deficient <input type="checkbox"/> Multiple Employment Barriers (3 or more)

31(b) POSSIBLE SERVICES		
Track A (ages 14-18)	Track B (ages 14-21)	Track C (ages 14-21)
<p style="text-align: center;">Ages 14-16</p> <ul style="list-style-type: none"> <input type="checkbox"/> Career Exploration <input type="checkbox"/> Summer Employment Opportunity <input type="checkbox"/> Job Readiness <input type="checkbox"/> Tutoring/Contextual Basic Skills <input type="checkbox"/> Leadership Development or Adult Mentoring* <input type="checkbox"/> Support Services to remain in school <input type="checkbox"/> Counseling/Guidance <input type="checkbox"/> 12 month Post Program Follow-Up** <p style="text-align: center;">Ages 17 – 18</p> <ul style="list-style-type: none"> <input type="checkbox"/> Career Planning <input type="checkbox"/> Summer Employment Opportunity/Paid-Unpaid Work Experience <input type="checkbox"/> Job Readiness <input type="checkbox"/> Tutoring/Contextual Basic Skills <input type="checkbox"/> Job Placement <input type="checkbox"/> Leadership Development or Adult Mentoring* <input type="checkbox"/> Support Services to remain in school <input type="checkbox"/> Counseling/Guidance <input type="checkbox"/> 12 month Post Program Follow-Up** 	<ul style="list-style-type: none"> <input type="checkbox"/> Tutoring/ESL/Contextual Basic Skills <input type="checkbox"/> Paid/Unpaid Work Experience <input type="checkbox"/> Drop-out Prevention Strategies <input type="checkbox"/> Occupational Skills <input type="checkbox"/> Leadership Development or Adult Mentoring* <input type="checkbox"/> Career Exploration/Planning <input type="checkbox"/> Exposure to Post-Secondary Opportunities <input type="checkbox"/> Support Services to remain in school <input type="checkbox"/> Counseling/Guidance <input type="checkbox"/> 12 month Post Program Follow-Up** 	<ul style="list-style-type: none"> <input type="checkbox"/> Alternative Education/GED Preparation <input type="checkbox"/> Tutoring/ESL/Contextual Basic Skills <input type="checkbox"/> Paid/Unpaid Work Experience <input type="checkbox"/> Drop-out Prevention Strategies <input type="checkbox"/> Occupational Skills <input type="checkbox"/> Leadership Development or Adult Mentoring* <input type="checkbox"/> Career Exploration/Planning <input type="checkbox"/> Exposure to Post-Secondary Opportunities <input type="checkbox"/> Support Services to return to school <input type="checkbox"/> 12 month Post Program Follow-Up** <input type="checkbox"/> Co-enrollment in One-Stop if 19+ <input type="checkbox"/> Job Readiness <input type="checkbox"/> Counseling/Guidance
31(c) PLANNED WIA OUTCOMES		
Track A (ages 14-18)	Track B (ages 14-21)	Track C (ages 14-21)
<p style="text-align: center;">Ages 14-16</p> <ul style="list-style-type: none"> <input type="checkbox"/> Attainment of Basic Skills <input type="checkbox"/> Attainment of Job Readiness skills <p style="text-align: center;">Ages 17-18</p> <ul style="list-style-type: none"> <input type="checkbox"/> Attainment of Basic Skills <input type="checkbox"/> Attainment of Job Readiness Skills <input type="checkbox"/> High School Diploma <input type="checkbox"/> Entry and Retention in Post Secondary Education, Advanced Training, Military Service, Employment or Registered Apprenticeship Program 	<p style="text-align: center;">Ages 14-18</p> <ul style="list-style-type: none"> <input type="checkbox"/> Attainment of Basic Skills <input type="checkbox"/> Attainment of Job Readiness Skills <input type="checkbox"/> High School Diploma <input type="checkbox"/> Entry and Retention in Post Secondary Education, Advanced Training, Military Service, Employment or Registered Apprenticeship Program <p style="text-align: center;">Ages 19-21***</p> <ul style="list-style-type: none"> <input type="checkbox"/> Placement and Retention into Unsubsidized Employment <input type="checkbox"/> Attainment of recognized credential relating to achievement of education or occupational skills 	<p style="text-align: center;">Ages 14-18</p> <ul style="list-style-type: none"> <input type="checkbox"/> Attainment of Basic Skills <input type="checkbox"/> Attainment of Job Readiness Skills <input type="checkbox"/> High School Diploma <input type="checkbox"/> Entry and Retention in Post Secondary Education, Advanced Training, Military Service, Employment or Registered Apprenticeship Program <p style="text-align: center;">Ages 19-21***</p> <ul style="list-style-type: none"> <input type="checkbox"/> Placement and Retention into Unsubsidized Employment <input type="checkbox"/> Attainment of recognized credential relating to achievement of education or occupational skills <input type="checkbox"/> Other required adult outcome
<p>* All WIA participants, regardless of track or age must receive either <u>Leadership Development Opportunities</u> or <u>Adult Mentoring</u></p> <p>** All WIA participants must receive <u>12 Months Post-program Follow-Up</u> services</p> <p>*** 19-21 year olds may be co-enrolled at the One-Stop, as an adult, to meet individual goals</p>		

PART IV - GOALS & SERVICE PLAN

SERVICE INVENTORY

32. Check Appropriate Services: Provide Justification and Provider Reference

Recommended Services	Recommended Providers (Justification/Comments)
<input type="checkbox"/> Tutoring/Contextual Basic Skills Study Skills Training, and Instructions Leading to Completion of Secondary School, including Drop Out Prevention Strategies Service Schedule: _____	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>
<input type="checkbox"/> Alternative secondary school services GED Preparation Service Schedule: _____	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>
<input type="checkbox"/> Summer Employment Opportunities that are Directly Linked to Academic and Occupational Learning Service Schedule: _____ Total Hours Worked: _____	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>
<input type="checkbox"/> Work Experiences Paid and Unpaid, including Internships and Job Shadowing, with non-profit and for profit Service Schedule: Total Hours Worked: _____	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>
<input type="checkbox"/> Occupational Skills Training as appropriate Service Schedule: _____	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>

<input type="checkbox"/> Leadership development opportunities May include community service and peer-oriented activities encouraging responsibility and other positive social behaviors during non-school hours, as appropriate Service Schedule: _____	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>
<input type="checkbox"/> Supportive Services <input type="checkbox"/> Child Care <input type="checkbox"/> Vision Care <input type="checkbox"/> Individual Personal Counseling <input type="checkbox"/> Group Counseling <input type="checkbox"/> Transportation <input type="checkbox"/> Other Needs _____	<p>Brief Description of how need(s) will be minimized or eliminated:</p>
<input type="checkbox"/> Adult Mentoring For the period of participation and a subsequent period, as appropriate Service Schedule: _____	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>
<input checked="" type="checkbox"/> Follow Up Services For <u>not less than 12 months after termination</u>	<p>Justification: Mandatory Post Program Follow Up (Refer to Post Program Follow Up Notes)</p> <p>Provider:</p>
<input type="checkbox"/> Comprehensive Guidance and Counseling Which may include drug and alcohol abuse counseling and referral, as appropriate Service Schedule: _____	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>
<input type="checkbox"/> Others: (Career Exploration/Planning; ESL; Other Drop-Out Prevention Strategies; Exposure to Post-Secondary Opportunities; Computer Training; Co-enrollment in One Stop if 19+ years old) Service Schedule:	<p style="text-align: right;">YES NO</p> <p>Begin Date: _____ -- End Date: _____ Completed: <input type="checkbox"/> <input type="checkbox"/></p> <p>Justification:</p> <p>Provider:</p>

Goal Inventory

33. Indicate the goal(s) set and describe the service interventions to be taken, including any level of participant involvement, towards achieving the goal(s).

Name of Participant

GOAL	SERVICE(S) INTERVENTION and PARTICIPANT INVOLVEMENT

Participant Signature

Staff Signature

INDIVIDUAL SERVICE STRATEGY (ISS)
Los Angeles County Workforce Area (WA)
LOS ANGELES COUNTY WORKFORCE INVESTMENT BOARD
Department of Community and Senior Services

CLIENT CERTIFICATION AND RELEASE AUTHORIZATION

I agree to participate in this objective assessment process for the development of an Individual Service Strategy (ISS) for meeting my education, service and training needs.

I agree to work with staff to revise and update my ISS as appropriate to meet any education, service and training need. I agree that the Plan of Action represents only a general plan of services and training intended to result in employment or other appropriate outcome. It does not represent entitlement to such services nor a contract between the program and me.

Check ONLY ONE BOX in the following paragraph:

The information contained in the ISS is CONFIDENTIAL. I authorize do not authorize the enrolling agency to release information contained in this ISS to agencies listed in the ISS and to prospective employers for the purpose of assisting me with job placement.

Client's Signature

Date

Parent's Signature
(Required if Client is under 18 years of age)

Date

Program Staff Signature

Date