

Education and Skills Assessment

Name

D.O.B:

Age:

Address:

Telephone contact:

Are you: Male

Female

What is your ethnicity:

Marital status?

Are you claiming benefits?

Yes

No

National Insurance N^o

Have you ever had a fit for work Assessment?

Yes

No

What level of education do you have?

Secondary

Further

Higher

Name of assessor:

Date:

What qualifications do you have? Are you currently doing any courses?

Give details:

How would you rate your literacy?: Good Average Poor

How would you rate your numeracy?: Good Average Poor

How would you rate your literacy?: Good Average Poor

**Does your substance misuse affect your ability to work now?
Are you currently in any form of treatment? How are you managing it?**

Do you have any additional health conditions? How are you managing them?

Have you worked in the past? What type of work would you like to do?



Details of conviction, community order, licence status

Is there anything else you would like to discuss with us?

**What barriers do you think you will have in achieving your employment goal?
How do you think you would overcome them?**

NEXT STEPS: (complete employment assessment and knowledge of work programme form)

