

COMPREHENSIVE EMPLOYMENT SUPPORTS (CES)

VOCATIONAL OUTCOMES INTERVIEWS – BASELINE AND FOLLOW-UP

VOCATIONAL OUTCOMES INTERVIEW BASELINE

Today's Date: ___/___/___

Interviewer: _____

Subject ID#: _____

Now, I would like to ask you some questions regarding your involvement in work and training in the past 6 months...

A1. In the past 6 months were you paid for working at any time, on- or off-the-books? 0. No →SKIP TO Q. B1 1. Yes

IF PAID FOR WORK PAST 6 MONTHS:

A2. In the past 6 months, how many days did you work (on- or off-the books, full-or part-time-includes off-jobs)?

Days worked past 6 months ___ ___ ___

A3. How many different jobs (how many different employers or companies) did you have in the past 6 months?

jobs past 6 months ___ ___

A4. For each of the jobs you have had in the last 6 months...

- a) What type of job was it?
- b) Who did you work for (who was your employer)?
- c) How did you get this job?
- d) Was it a job on- or off-the books?
- e) What was the hourly pay rate (before taxes)?
- f) Did you get health insurance coverage at this job?

	<u>a.</u> Type of job	<u>b.</u> Employer	<u>c.</u> How obtained	<u>d.</u> On- or Off- the books		<u>e.</u> Pay rate/hr (before tax)	<u>f.</u> Health Insurance	
				On- 1	Off- 2		No 1	Yes 2
Job 1.	_____	_____	_____	1	2	\$____.	1	2
Job 2.	_____	_____	_____	1	2	\$____.	1	2
Job 3.	_____	_____	_____	1	2	\$____.	1	2
Job 4.	_____	_____	_____	1	2	\$____.	1	2
Job 5.	_____	_____	_____	1	2	\$____.	1	2
Job 6.	_____	_____	_____	1	2	\$____.	1	2
Job 7.	_____	_____	_____	1	2	\$____.	1	2
Job 8.	_____	_____	_____	1	2	\$____.	1	2

(Continued)

A5. For each of the jobs you have had in the last 6 months...

- g) During a typical week, how many hours a week did you work at that job?
- h) In total, how many days did you work at this job in the last 6 months?
- i) When did you start working at this job?
- j) When did this job end? (still working at that job = 00/00/00)
- k) Why did this job end?

# Hrs/wk	Total # of days at this job (past 6 mos.)	Date started	Date ended	Reason for job ending	Occupation Code*
Job 1. _____	_____	___/___/___	___/___/___	_____	___
Job 2. _____	_____	___/___/___	___/___/___	_____	___
Job 3. _____	_____	___/___/___	___/___/___	_____	___
Job 4. _____	_____	___/___/___	___/___/___	_____	___
Job 5. _____	_____	___/___/___	___/___/___	_____	___
Job 6. _____	_____	___/___/___	___/___/___	_____	___
Job 7. _____	_____	___/___/___	___/___/___	_____	___
Job 8. _____	_____	___/___/___	___/___/___	_____	___

* Occupation codes- see last page

IF NOT paid for work past 6 mos Q. A1 1st page:

B1. When is the last time you worked (on- or off-the books, full-or part-time)?

Date last worked ___/___/___ NEVER = 00/00/00

B2. What type of job was it?
RECORD VERBATIM BELOW

B3. How long did you have that job? (in weeks):

Number of weeks at last job _____

B4. How come you stopped working at that time?

RECORD VERBATIM BELOW AND ENTER THE APPROPRIATE CODE FROM CODE LIST BELOW

JOB END CODE: __ __

1. Fired
2. Laid off
3. Quit/Resigned
4. Temporary job ended
5. Other _____
specify

JOB SEARCH ACTIVITY

B5a. Did you look for work in the past 6 months?

0. No → ASK Q. B5b
1. Yes → SKIP TO Q. B6

B5b. How come you did not look for work?

B 6. Many things may keep people from working or looking for work. Tell me to what extent each of the following might make it difficult for you to look for or find work...

1. Not at all
2. A little
3. Moderately
4. Very much

	Very Much				Not at all	
Insufficient work/job skills	1	2	3	4		T12V6
No jobs available	1	2	3	4		T12V7
Poor physical health.....	1	2	3	4		T12V8
Mental health issues.....	1	2	3	4		T12V9
Don't want to look for work.....	1	2	3	4		T12V10
Unable to read	1	2	3	4		T12V11
No job/work experience.....	1	2	3	4		T12V12
Can't get along with bosses	1	2	3	4		T12V13
Language problems.....	1	2	3	4		T12V14
Drug or alcohol use	1	2	3	4		T12V15
Criminal history, case pending in court.....	1	2	3	4		T12V16
Can get or have enough money to live from other sources	1	2	3	4		T12V17
Must care for small children/no child care.....	1	2	3	4		T12V10
Must care for other family member.....	1	2	3	4		T12V11
Partner abusive, does not let you leave the house	1	2	3	4		T12V12
Already working "under the table"	1	2	3	4		T12V13
Don't know anyone who works.....	1	2	3	4		T12V14
Transportation problems	1	2	3	4		T12V15
Can't get along with coworkers	1	2	3	4		T12V16
Difficulties with time management (being on time etc.)	1	2	3	4		T12V17

B7a. IF YES to B5a: What did you do to find work?

1. Employment agency
2. Unemployment office
3. Contacted/talked to a job counselor
4. Employers approached directly (telephone, letter or in person)
5. Internet job board/job site
6. Placed or answered ads
7. Asked friends/family about jobs they may know about
8. Other _____

B7b. Did you receive any job offers as a result of your search for work?

- 0. No → SKIP TO Q. B10
- 1. Yes

B8. IF YES to B7: What type of job were you offered?

B9. What happened (e.g., did you accept the job, turn it down)?

B10. Did you have problems or trouble finding work during that period?

- 0. No → SKIP TO Q. B12a
- 1. Yes

B11. What kind of problems or trouble did you have finding work in the past 6 months?

B12a. Did you work as an unpaid volunteer in the past 6 months?

- 0. No → SKIP TO Q. B13
- 1. Yes

B12b. What type of volunteer work did you do?

B12c. In the past six months, how many days would say you worked as a volunteer?

Days worked as volunteer past 6 months _ _ _

B13. How important to you now is help or referral for employment, training or vocational counseling?

- 1. Not at all
- 2. A little
- 3. Moderately
- 4. Very important

OTHER VOCATIONAL /EDUCATIONAL TRAINING

- a) Are you currently enrolled in any of the following programs?
- b) Were you enrolled in any of the following programs in the past 6 months?
- c) How long have you been/were you enrolled in that program?
- d) IN NOT CURRENTLY ENROLLED: Did you graduate/finish?
- e) IF NO: How come?

	Currently		Past 6-months		How long enrolled (in months)	Graduated		→ (IF NOT) Why?
	No	Yes	No	Yes		No	Yes	
GED program	0	1	0	1	_____	0	1	_____
VESID	0	1	0	1	_____	0	1	_____
Junior college (associate degree)	0	1	0	1	_____	0	1	_____
College (4-yr degree)	0	1	0	1	_____	0	1	_____
Trade school or Business school	0	1	0	1	_____	0	1	_____
Job Training program _____ <i>specify</i>	0	1	0	1	_____	0	1	_____

OCCUPATION CODES

- | | |
|---------------------------------------|-----------------------------|
| 01 Professional and technical | 08 Non farm laborer |
| 02 Manager and administrator | 09 Private household worker |
| 03 Sales | 10 Service worker |
| 04 Clerical or office worker | 11 Farm and farm manager |
| 05 Craft and kindred | 12 Military service |
| 06 Machine operator | 86 Other |
| 07 Transportation equipment operative | |

VOCATIONAL OUTCOMES INTERVIEW FOLLOW-UP

Today's Date: ___/___/___/___/___/___/

Interviewer: _____

Subject ID#: _____

Now, I would like to ask you some questions regarding your involvement in work and training in the past 6 months since you entered the program...

A1. In the past 6 months were you paid for working at any time, on- or off-the-books? 0. No →SKIP TO Q. B1 1. Yes

IF PAID FOR WORK PAST 6 MONTHS:

A2. In the past 6 months, how many days did you work (on- or off-the books, full-or part-time-includes off-jobs)?

Days worked past 6 months _____

A3. How many different jobs (how many different employers or companies) did you have in the past 6 months?

jobs past 6 months _____

A4. For each of the jobs you have had in the last 6 months...

- a) What type of job was it?
- b) Who did you work for (who was your employer)?
- c) How did you get this job?
- d) Was it a job on- or off-the books?
- e) What was the hourly pay rate (before taxes)?
- f) Did you get health insurance coverage at this job?

	<u>a.</u> Type of job	<u>b.</u> Employer	<u>c.</u> How obtained	<u>d.</u> On- or Off- the books		<u>e.</u> Pay rate/hr (before tax)	<u>f.</u> Health Insurance	
				On- 1	Off- 2		No 1	Yes 2
Job 1.	_____	_____	_____	1	2	\$_____.	1	2
Job 2.	_____	_____	_____	1	2	\$_____.	1	2
Job 3.	_____	_____	_____	1	2	\$_____.	1	2
Job 4.	_____	_____	_____	1	2	\$_____.	1	2
Job 5.	_____	_____	_____	1	2	\$_____.	1	2
Job 6.	_____	_____	_____	1	2	\$_____.	1	2
Job 7.	_____	_____	_____	1	2	\$_____.	1	2
Job 8.	_____	_____	_____	1	2	\$_____.	1	2

(Continued)

A5. For each of the jobs you have had in the last 6 months...

- g) During a typical week, how many hours a week did you work at that job?
- h) In total, how many days did you work at this job in the last 6 months?
- i) When did you start working at this job?
- j) When did this job end? (still working at that job = 00/00/00)
- k) Why did this job end?

# Hrs/wk	Total # of days at this job (past 6 mos.)	Date started	Date ended	Reason for job ending	Occupation Code*
Job 1. _____	_____	__/__/__	__/__/__	_____	__-__
Job 2. _____	_____	__/__/__	__/__/__	_____	__-__
Job 3. _____	_____	__/__/__	__/__/__	_____	__-__
Job 4. _____	_____	__/__/__	__/__/__	_____	__-__
Job 5. _____	_____	__/__/__	__/__/__	_____	__-__
Job 6. _____	_____	__/__/__	__/__/__	_____	__-__
Job 7. _____	_____	__/__/__	__/__/__	_____	__-__
Job 8. _____	_____	__/__/__	__/__/__	_____	__-__

* Occupation codes- see last page

IF NOT paid for work past 6 mos Q. A1 1st page:

JOB SEARCH ACTIVITY

B1a. Did you look for work in the past 6 months?

- 0. No → ASK Q. B1b
- 1. Yes → SKIP TO Q. B2a

B1b. How come you did not look for work?

B2a. Many things may keep people from working or looking for work. Tell me to what extent each of the following might make it difficult for you to look for or find work...

- 5. Not at all
- 6. A little
- 7. Moderately
- 8. Very much

	Very Much			Not at all	
Insufficient work/job skills	1	2	3	4	T12V6
No jobs available	1	2	3	4	T12V7
Poor physical health.....	1	2	3	4	T12V8
Mental health issues.....	1	2	3	4	T12V9
Don't want to look for work.....	1	2	3	4	T12V10
Unable to read	1	2	3	4	T12V11
No job/work experience.....	1	2	3	4	T12V12
Can't get along with bosses	1	2	3	4	T12V13
Language problems.....	1	2	3	4	T12V14
Drug or alcohol use	1	2	3	4	T12V15
Criminal history, case pending in court.....	1	2	3	4	T12V16
Can get or have enough money to live from other sources	1	2	3	4	T12V17
Must care for small children/no child care.....	1	2	3	4	T12V10
Must care for other family member.....	1	2	3	4	T12V11
Partner abusive, does not let you leave the house	1	2	3	4	T12V12
Already working "under the table"	1	2	3	4	T12V13
Don't know anyone who works.....	1	2	3	4	T12V14
Transportation problems	1	2	3	4	T12V15
Can't get along with coworkers	1	2	3	4	T12V16
Difficulties with time management (being on time etc.)	1	2	3	4	T12V17

B2b. Did you discuss these issues with the Employment Specialist?

- 0. No → ASK Q. B2c
- 1. Yes → ASK Q. B2d

B2c. How come?

B2d. What did the Employment Specialist tell you (e.g., did he/she suggest solutions or strategies to help you get around the issues?)

B3. IF YES to B1a: What did you do to find work?

1. Employment agency
2. Unemployment office
3. Contacted/talked to a job counselor
4. Employers approached directly (telephone, letter or in person)
5. Internet job board/job site
6. Placed or answered ads
7. Asked friends/family about jobs they may know about
8. Other _____

B4a. Did the Employment Specialist help you or assist you in looking for work?

0. No → SKIP to B4c
1. Yes → ASK B4b

B4b. Specifically, how did he/she help you?

B4c. How come she/he did not help you look for work?

B5. Did you receive any job offers as a result of your search for work?

0. No → SKIP TO Q. B8
1. Yes

B6. IF YES to B5: What type of job were you offered?

B7. What happened (e.g., did you accept the job, turn it down)?

B8. Did you have problems or trouble finding work during that period?

0. No → SKIP TO Q. B10a
1. Yes

B9. What kind of problems or trouble did you have finding work in the past 6 months?

B10a. Did you work as an unpaid volunteer in the past 6 months?

0. No → SKIP TO Q. B11

1. Yes

B10b. What type of volunteer work did you do?

B10c. In the past six months, how many days would say you worked as a volunteer?

Days worked as volunteer past 6 months _____

B11. How important to you now is help or referral for employment, training or vocational counseling?

- 5. Not at all
- 6. A little
- 7. Moderately
- 8. Very important

OTHER VOCATIONAL /EDUCATIONAL TRAINING

- 1. Are you currently enrolled in any of the following programs?
- 2. Were you enrolled in any of the following programs in the past 6 months?
- 3. How long have you been/were you enrolled in that program?
- 4. IN NOT CURRENTLY ENROLLED: Did you graduate/finish?
- 5. IF NO: How come?

	Currently		Past 6-months		How long enrolled (in months)	Graduated		→ (IF NOT) How come?
	No	Yes	No	Yes		No	Yes	
GED program	0	1	0	1	_____	0	1	_____
VESID	0	1	0	1	_____	0	1	_____
Junior college (associate degree)	0	1	0	1	_____	0	1	_____
College (4-yr degree)	0	1	0	1	_____	0	1	_____
Trade school or Business school	0	1	0	1	_____	0	1	_____
Job Training program _____ <i>specify</i>	0	1	0	1	_____	0	1	_____

OCCUPATION CODES

01	Professional and technical	08	Non farm laborer
02	Manager and administrator	09	Private household worker
03	Sales	10	Service worker
04	Clerical or office worker	11	Farm and farm manager
05	Craft and kindred	12	Military service
08	Machine operator	86	Other
09	Transportation equipment operative		