

WORK PROGRAMME INDIVIDUAL ACTION PLAN

| | |
|---------------------------|--|
| Name | |
| Customer Unique ID | |

| | |
|---|--|
| Jobcentre Plus Adviser | |
| Staff Member conducting Attachment Meeting | |
| Allocated Work Broker (or equivalent) | |
| Work Health Expert? Yes / No | |

| | |
|-----------------------------------|--|
| Date of Referral from JCP | |
| Date of Attachment Meeting | |
| Expected Completion Date | |
| Actual Completion Date | |

Delivering services on behalf of



JOB ASPIRATIONS

Three preferred jobs or occupations

WORK EXPERIENCE

Details of work experience

QUALIFICATIONS

Details of work – related qualifications

INITIAL EMPLOYABILITY ASSESSMENT SUMMARY

Below is a record of your answers to the Initial Employability Assessment. This will highlight priority areas where additional support is required to move you closer to securing employment.

In addition, you will be booked to attend:

- A Work Programme Awareness Session
- Your next appointment to see a Work Broker (or equivalent) to continue developing your Action Plan and priorities.

(This page will display the answers to all 7 sections of IEA Tool)

| <u>A</u> Job specific skills and experience | |
|---|--|
| <u>B</u> Job search skills | |
| <u>C</u> Motivations and expectations | |
| <u>D</u> Work-related soft skills | |
| <u>E</u> Basic skills | |
| <u>F</u> Health & specialist support needs | |

| | |
|--------------------------------|--|
| G Environment | |
|--------------------------------|--|

Confirmation of Agreed Priority Actions

I confirm that I have attended my Attachment Meeting and completed an Initial Employability Assessment, which has highlighted priority actions to assist me in helping to find and keep work. I agree with these priority actions and understand that these will be developed at my next appointment and that I will need to agree further actions and targets with the staff at **[Insert Company name or Subcontractor Name]** to help me move nearer to employment.

I confirm that I have been provided with a brief overview of the purpose of the Work Programme and the European Social Fund (ESF) and I am aware that the Work Programme is part financed by the European Social Fund.

I confirm that my Identity has been checked at this Attachment Meeting and that I am the person referred to this programme by Jobcentre Plus.

Customer Signature _____ **Date** _____

Print Name _____ **Date** _____

Staff Member Signature _____ **Date** _____

Print Name _____ **Date** _____

(these sections will only apply later, when exiting)

CUSTOMER EXIT REPORT

| |
|---|
| Summary of actions completed/not completed by the customer (including reasons for non-completion) |
| |
| Employability (Summary of the customer's employment prospects and the most appropriate type of employment) |
| |
| Attitude (Summary of any noted changes in attitude and the reasons for this change) |
| |
| Barriers (Summary of the barriers/challenges that the customer has overcome, remained or arisen whilst on the Work Programme) |
| |
| Compliance (Summary of the level of compliance demonstrated by the customer and any reasons behind non-compliance) |
| |

Next Steps

recommendations to Jobcentre Plus on the most appropriate next steps for the customer

Signature of Staff Member _____ **Date** _____

Print Name of Staff Member _____ **Date** _____