

Job Seeker Snapshot Off-line Form

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Privacy Statement

Your personal information is protected by law, including by the *Privacy Act 1988* (Cth) (Privacy Act). The personal information you provide in this form is collected by your employment services provider, on behalf of the Australian Government Department of Employment and Workplace Relations, to determine the most appropriate employment assistance for you and to provide you with employment and training opportunities.

Your information may be disclosed to other Commonwealth agencies involved in the administration of employment services and social security payments and services including, Services Australia, Department of Social Services, National Indigenous Australians Agency and their respective contracted service providers where those providers are delivering services to you.

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Voluntary disclosure questions throughout this form are marked with an asterisk (*). All other questions are mandatory, unless sequenced past. These fields must be completed.

Participant Details

Workforce Australia Employment Services Provider Details

Name of Organisation

Name of Consultant Date

Workforce Australia Participant Details

Job Seeker ID Centrelink Customer Reference Number (CRN)

Title Surname

Given Names Gender

Country of Birth Nationality Age

Residential Address (include State and Postcode)

Postal Address (include State and Postcode)

Phone (Home) Phone (Mobile) Phone (Work)

Experience and Education

These questions ask about your work history, experience and education.

Experience (including work history)

1. What type of work or jobs are you interested in?

Enter the types of jobs or occupations you'd like to search and apply for. You can list up to 10 jobs.

2. What have you spent the most time doing in the past 2 years?

Please select the activity that have taken up the most amount of your time over the past two years.

- | | |
|---|--|
| <input type="radio"/> Paid work
<i>(includes full time, part time or casual work, employment overseas, seasonal work or still working)</i> | <input type="radio"/> Studying full-time |
| <input type="radio"/> Unpaid work
<i>(includes volunteering but not caring)</i> | <input type="radio"/> Studying part-time |
| <input type="radio"/> Community Development Programme (CDP) | <input type="radio"/> Parenting |
| <input type="radio"/> Unemployed
<i>(i.e. not working but looking for work)</i> | <input type="radio"/> Caring |
| | <input type="radio"/> Working while in prison or other detention |
| | <input type="radio"/> NOT working and NOT looking for work |

If answered 'Paid work' go to Question 3, otherwise go to Question 4.

3. In your most recent job, how many hours did you usually work per week?

Casual employment with irregular hours should be recorded as 'Irregular or seasonal'.

- | | |
|---|---|
| <input type="radio"/> Usually worked 30 hours or more | <input type="radio"/> Usually worked less than 8 hours |
| <input type="radio"/> Usually worked 8 to 29 hours | <input type="radio"/> Didn't work regular hours
<i>(e.g. casual shifts or seasonal work)</i> |

Go to Question 5.

4. Have you done any paid work (in Australia or overseas) in the last 2 years?

This includes any paid work in Australia or overseas.

- ☐ Yes ☐ No

Education and Qualifications

5. What is the highest level of schooling you have completed?

If you completed schooling overseas, please select the closest option.

- | | |
|--|----------------------------------|
| <input type="radio"/> Did not go to school | <input type="radio"/> Year 10 |
| <input type="radio"/> Special school/support unit in school | <input type="radio"/> Year 11 |
| <input type="radio"/> Primary school or less | <input type="radio"/> Year 12/13 |
| <input type="radio"/> Completed primary school but less than Year 10 | |

6. Have you completed any of the following qualifications?

Please select ALL that apply.

- | | |
|--|--|
| <input type="checkbox"/> Certificate I or Industry-specific license or ticket | <input type="checkbox"/> Diploma, Advanced Diploma or Associate Degree or equivalent |
| <input type="checkbox"/> Certificates II | <input type="checkbox"/> Vocational Graduate Diploma or Graduate Diploma or equivalent |
| <input type="checkbox"/> Certificates III or IV | <input type="checkbox"/> Bachelor Degree or equivalent |
| <input type="checkbox"/> Course run by private or community organisation | <input type="checkbox"/> Masters Degree or equivalent |
| <input type="checkbox"/> Vocational Graduate Certificate or Graduate Certificate or equivalent | <input type="checkbox"/> Doctoral Degree or equivalent |
| <input type="checkbox"/> Tradesperson's qualification | <input type="checkbox"/> None of the above |

If answered 'None of the above' go to Question 9

7. Can you still use any of these work-related qualifications?

- ☐ Yes ☐ No

If answered 'Yes' go to Question 9.

8. What is preventing you from using your qualification(s)?

Please select ALL that apply.

- | | |
|---|--|
| <input type="checkbox"/> Disability or health related reasons | <input type="checkbox"/> Qualification not recognised (including overseas qualification(s) not recognised) |
| <input type="checkbox"/> Low English language skills | |
| <input type="checkbox"/> Qualification suspended/terminated | <input type="checkbox"/> Qualification outdated or irrelevant |

Internet skills

These questions ask about your internet access and skills. We want to make sure that you get the right support to search and apply for jobs.

Internet use

9. Can you access the internet at least once a week to look for work?

☐ Yes ☐ No ☐ Not Sure

10. Do you know how to use job search websites and submit job applications and resumes online or via email?

In other words, do you know your way around a job search website and how to submit job applications online? Do you know how to send an application and resume to an employer using email?

☐ Yes ☐ No ☐ Not Sure

The next questions 11-13 are only asked if the Participants indicates 'Yes' to question 9 and 'No' or 'Not sure' to question 10.

11. In the past month, how often did you use the internet?

This includes for social media, email, browsing websites, or online shopping.

☐ Every day ☐ Less than once a week
☐ At least once a week

12. Thinking about paying bills online, select the statement that best describes you.

☐ I don't pay bills online ☐ I sometimes get help
☐ I don't need help ☐ I always get help

13. Thinking about sending emails, select the statement that best describes you.

☐ I don't send or receive emails ☐ I sometimes get help
☐ I don't get help ☐ I always get help

Ability to work

These questions ask about disabilities and medical conditions that may affect the work you can do. We want to make sure you get the right support to find a job that meets your needs.

Work Capacity

14. Do you have any disabilities or medical conditions that affect the number of hours you are able to work per week?*

☐ Yes ☐ No ☐ Not sure/don't know ☐ Do not wish to answer

If answered 'No', 'Not sure/don't know' or 'Do not wish to answer' go to Question 16.

15. What is the most number of hours you think you are able to work per week?

☐ 30 hours or more ☐ 15 to 29 hours ☐ Less than 15 hours

If less than 30 hours you may need to provide evidence (e.g. a report from a doctor).

16. Do you have any disabilities or medical conditions that affect the type of work you can do?*

☐ Yes ☐ No ☐ Not sure/don't know ☐ Do not wish to answer

If answered 'No', or 'Do not wish to answer' to Question 14 and Question 16 go to Question 20.
Otherwise go to Question 17.

17. Do you think you need additional support to help you at work as a result of your condition(s)?

☐ Yes ☐ No ☐ Not sure/don't know

18. How long will your condition(s) affect your ability to work?

☐ Less than 3 months ☐ 3 months or more ☐ Not sure/don't know

If answered 'Less than 3 months' go to Question 20.

19. What are the conditions?

List up to 10 conditions:

1	<input type="text"/>	6	<input type="text"/>
2	<input type="text"/>	7	<input type="text"/>
3	<input type="text"/>	8	<input type="text"/>
4	<input type="text"/>	9	<input type="text"/>
5	<input type="text"/>	10	<input type="text"/>

Your Background

These questions ask about your language skills and your descent. We want to make sure you get the right payments and support.

Language

20. Did you speak English at home as a child?

☐ Yes ☐ No

If answered 'Yes' go to Question 22.

21. What language(s) did you first speak as a child?

List up to 2 languages that you spoke most regularly.

1

2

22. How well do you speak English?

☐ Very well ☐ Well ☐ Not well ☐ Not at all

23. How well do you read English?

☐ Very well ☐ Well ☐ Not well ☐ Not at all

24. How well do you write English?

☐ Very well ☐ Well ☐ Not well ☐ Not at all

If answered 'Very well' or 'Well' to Questions 22, 23 and 24 **and** are Australian born go to Question 26.

If answered 'Very well' or 'Well' to Questions 22, 23 and 24 **and** are non-Australian born go to Question 27.

Otherwise go to Question 25.

25. Have you done any courses or classes to help improve your English language skills in the last 6 months?

☐ Yes ☐ No

Go to question 26 if you're Australian born **or** go to Question 27 if non-Australian born.

Note: If the Participant has answered 'No', it may be appropriate to refer the Participant to the Skills for Education and Employment (SEE) program or the Adult Migrant English Program (AMEP).

Descent

26. Do you identify as Aboriginal and/or Torres Strait Islander?*

- ☐ Yes, Aboriginal ☐ No
- ☐ Yes, Torres Strait Islander ☐ Prefer not to say
- ☐ Yes, Aboriginal and Torres Strait Islander

27. Have you ever been granted an Australian refugee or humanitarian visa?*

- ☐ Yes ☐ No ☐ Not sure/don't know ☐ Do not wish to answer

If answered 'No', 'Not sure/don't know' or 'Do not wish to answer' go to Question 30.

28. From which country did you arrive?

29. Was this more than five years ago?

- ☐ Yes, more than 5 years ago ☐ No, 5 years ago or less ☐ Not sure/don't know

Personal Circumstances

We need to ask you some personal questions about your circumstances. We want to make sure that you get the right payments and support. You may be eligible for extra support.

Living Circumstances

30. Have you been living in rented accommodation or your own home for the past 12 months?*

- ☐ Yes ☐ No ☐ Not sure/don't know

If answered 'Yes' go to Question 32.

31. Are you currently staying in emergency or temporary accommodation?

- | | |
|--|---|
| <input type="radio"/> No | <input type="radio"/> Yes – short stays in caravan park |
| <input type="radio"/> Yes – a refugee | <input type="radio"/> Yes – temporarily staying with friends (or couch surfing) |
| <input type="radio"/> Yes – emergency, transitional or supported accommodation | <input type="radio"/> Yes – living in a squat |
| <input type="radio"/> Yes – a hostel, boarding house or rooming house | <input type="radio"/> Yes – sleeping out, in a car or tent |
| <input type="radio"/> Yes – a hotel | <input type="radio"/> Yes – I have nowhere to stay |
| | <input type="radio"/> Yes – other |

If answered any 'Yes' go to Question 33.

32. How often have you moved in the past 12 months?

- ☐ 0–3 moves ☐ 4 or more moves

33. Do you live on your own?

- ☐ Yes ☐ No

If answered 'Yes' go to Question 37.

34. Who currently lives with you?

Select ALL that apply.

- | | |
|--|--|
| <input type="checkbox"/> Partner/spouse (includes same-sex partner) | <input type="checkbox"/> Parent(s)/guardian(s) |
| <input type="checkbox"/> Dependent child/children under 16 years of age | <input type="checkbox"/> Other family member(s) or relative(s) |
| <input type="checkbox"/> Dependent full time student(s) aged between 16 and 24 years | <input type="checkbox"/> Others – not family |

If answer includes 'Dependent child/children under 16 years of age' go to Question 35, otherwise go to Question 37.

35. Are you the main caregiver for this child/these children?

☐ Yes ☐ No ☐ Care is shared equally with another person

If answered 'No' go to Question 37.

36. What is the date of birth of your youngest child?

Transport

37. Do you have a valid driver's licence?

Valid means an Australian licence that is paid for and not cancelled or suspended.

☐ Yes ☐ No

If answered 'No' go to Question 39.

38. Do you have your own car or motorcycle?

☐ No - don't own a car/motorcycle ☐ Yes - own a car/motorcycle but cannot afford running costs/maintenance
☐ Yes - I have my own car/motorcycle ☐ No - other

39. Thinking about getting to and from work, what modes of transport can you access?

Please select ALL that apply.

<input type="checkbox"/> Own non-motorised transport (e.g. bicycle)	<input type="checkbox"/> Taxi
<input type="checkbox"/> Other private transport (e.g. friend's or relative's car)	<input type="checkbox"/> Other motorised transport
<input type="checkbox"/> Public transport (e.g. bus or train)	<input type="checkbox"/> No transport (except walking)

Personal Factors

The Criminal Convictions questions asked will depend on the age of the Participant. If the Participant is:

- aged 22 years or younger go to Question 40
- aged between 23 and 27 years go to Question 42 or
- aged 28 years or older go to Question 44.

40. Have you spent time in prison in the last 2 years as a result of a criminal conviction?*

☐ Yes ☐ No ☐ Do not wish to answer

If answered 'No' go to Question 41, if answered 'Yes' go to Question 46.

41. Have you been convicted of a criminal offence in the last 5 years but received a non-custodial sentence?*

A non-custodial sentence means not going to prison, but receiving something such as a fine, community service, or a suspended sentence.

☐ Yes ☐ No ☐ Do not wish to answer

42. Have you spent time in prison since turning 21 years of age as a result of a criminal conviction?*

☐ Yes ☐ No ☐ Do not wish to answer

If answered 'No' go to Question 43, if answered 'Yes' go to Question 46.

43. Have you been convicted of a criminal offence since turning 18 years of age but received a non-custodial sentence?*

A non-custodial sentence means not going to prison, but receiving something such as a fine, community service, or a suspended sentence.

☐ Yes ☐ No ☐ Do not wish to answer

44. Have you spent time in prison in the last 7 years as a result of a criminal conviction?*

☐ Yes ☐ No ☐ Do not wish to answer

If answered 'No' go to Question 45, if answered 'Yes' go to Question 46.

45. Have you been convicted of a criminal offence in the last 10 years but received a non-custodial sentence?*

A non-custodial sentence means not going to prison, but receiving something such as a fine, community service, or a suspended sentence.

☐ Yes ☐ No ☐ Do not wish to answer

46. Was your sentence 14 days or less?*

☐ Yes, 14 days or less ☐ No, more than 14 days

47. When you were in your early teens (aged 13 to 16), was at least one of your parents or legal guardians regularly in paid employment?*

This question is asked only of Participants aged less than 45 years.

☐ Yes ☐ No ☐ Not applicable (e.g. I was raised in an orphanage) ☐ Do not wish to answer

48. Is there anything else that might affect your ability to work, get work or look for work?*

☐ Yes ☐ No ☐ Do not wish to answer

If answered 'No' or 'Do not wish to answer', go to Question 51.

49. Please select the factors that might affect your ability to work, get work or look for work.

Please select ALL that apply.

- | | |
|---|---|
| <input type="checkbox"/> Caring responsibilities | <input type="checkbox"/> Grief/trauma/personal crisis |
| <input type="checkbox"/> Criminal court action pending/
on bail/on remand | <input type="checkbox"/> Issues with anger/using violence |
| <input type="checkbox"/> Dental issues | <input type="checkbox"/> Numeracy issues (e.g. adding numbers) |
| <input type="checkbox"/> Domestic and family violence | <input type="checkbox"/> Pregnancy |
| <input type="checkbox"/> Don't have anywhere stable to live/living in
emergency or temporary accommodation | <input type="checkbox"/> Relationship breakdown |
| <input type="checkbox"/> Drug treatment program (e.g. methadone) | <input type="checkbox"/> Self-esteem/motivation/
presentation issues |
| <input type="checkbox"/> Gambling addiction | <input type="checkbox"/> Severe stress |
| | <input type="checkbox"/> Sleep problems/insomnia |

Important note: When a Participant records 'Domestic and family violence' or 'Grief/trauma/personal crisis', the Participant should be advised to speak to a Centrelink Specialist Officer.

50. For any other factors not included in the list above, please provide details.

51. What is your job search confidence?

It's important to understand how you are feeling about your job search. On a scale of 1 to 7 (where, 1 is strongly disagree, 4 is I'm not sure and 7 is strongly agree), rate the following statement:

I feel confident I will get a job soon.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7

Participant Declaration

I

- I have read and understood the privacy statement included at the beginning of this form.
- If required, I consent to the collection of my sensitive information, such as health information, in accordance with the form.

Participant's Signature

Date Signed