



## Employment Planning Worksheet

Date available for work: \_\_\_\_\_

Three jobs I would like to apply for right away:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Cities/locations I am willing to work in:

1. \_\_\_\_\_
2. \_\_\_\_\_

I want (check two):

- Permanent work
- Full-time work
- Temporary work
- Part-time work

Preferred Shifts:

- Days (1st shift)
- Evenings (2nd shift)
- Overnights (3rd Shift)

Minimum acceptable pay:           \$ per hour

Do I have a valid driver's license?    Yes    No

Do I have transportation to work?    Yes    No

If not, how will I get to and from work?

Benefits I must have:

- Health insurance
- Paid time off
- Life insurance
- Other:

Physical limitations (as noted by doctor):

- Lifting restricted to pounds
- Limited sitting or standing
- Low noise level
- Wheelchair accessible
- Clean air (no dust or fumes)
- Other:

I want:

- Close Supervision
- Some Supervision
- Little Supervision
- To Supervise Others

I prefer to:

- Work alone
- Work with others

Cultural accommodations needed:

USE THE SHARE BUTTON ON THE RIGHT  
TO E-MAIL YOUR ANSWERS TO YOUR  
TEACHER OR CAREER COUNSELOR.

SHARE