

Client ID # _____

Date of Administration: _____

EMPLOYMENT AND RELATED ACTIVITIES

CLIENT SELF-ADMINISTERED OR CLINICIAN-ADMINISTERED

1. **Are you currently working toward a goal related to employment at this time, for example, to get a job or find a new job?**

- Yes
- No
- Unsure/Don't know

2. **Have you had an internship, apprenticeship, or done volunteer work any time since the last assessment?**

- Yes
- No
- Unsure/Don't know

3. **If yes, was this paid?**

- Yes
- No

The next series of questions covers jobs you have had since the last assessment. The first few questions ask about your current or most recent job. Later questions ask about up to two additional jobs you may have had since the last assessment.

4. **Have you had a paid job any time since the last assessment?**

- Yes
- No → *Skip to next section*
- Unknown → *Skip to next section*

5. **[OPTIONAL] If yes: What is/was your job?**

6. What type of work is this job?

Select the best option.

- Traineeship
- Professional/ Technical/ Managerial (e.g., doctor, lawyer, accountant, teacher, project manager)
- Office and Administrative Support Occupations and Sales Positions
- Personal Care and Service (e.g., cashier, dog walker, food preparation)
- Construction/ Mechanical/ Factory Worker/ Maintenance
- Agricultural (e.g., farm, fishery, forest)
- Transportation (e.g., bus, taxi driver)
- Military, emergency services (e.g., police, firefighter), or security
- Other (Specify: _____)
- Unknown

7. Is/was this a full-time position (30 hours or more per week) or a part-time position (less than 30 hours per week)?

- Full-time
- Part-time
- Other (Specify: _____)

8. [OPTIONAL] About how much was your take-home pay per week in this position?

\$_____ (round to dollars, no cents)

JOB #2

9. **Have you had any other job since the last assessment?**

- Yes
- No → *Skip to next section*

10. **[OPTIONAL] What is/was your job?**

11. **What type of work is this job?**

- Traineeship
- Professional/ Technical/ Managerial (e.g., doctor, lawyer, accountant, teacher, project manager)
- Office and Administrative Support Occupations and Sales Positions
- Personal Care and Service (e.g., cashier, dog walker, food preparation)
- Construction/ Mechanical/ Factory Worker/ Maintenance
- Agricultural (e.g., farm, fishery, forest)
- Transportation (e.g., bus, taxi driver)
- Military, emergency services (e.g., police, firefighter), or security
- Other (Specify: _____)
- Unknown

12. **Is/was this a full-time position (30 hours or more per week) or a part-time position (less than 30 hours per week)?**

- Full-time
- Part-time
- Other (Specify: _____)

13. **[OPTIONAL] About how much was your take-home pay per week in this position?**

\$_____ (round to dollars, no cents)

JOB #3

14. Have you had a third job since the last assessment?

- Yes
- No → *Skip to next section*

15. [OPTIONAL] What is/was your other job?

16. What type of work is this job?

- Traineeship
- Professional/ Technical/ Managerial (e.g., doctor, lawyer, accountant, teacher, project manager)
- Office and Administrative Support Occupations and Sales Positions
- Personal Care and Service (e.g., cashier, dog walker, food preparation)
- Construction/ Mechanical/ Factory Worker/ Maintenance
- Agricultural (e.g., farm, fishery, forest)
- Transportation (e.g., bus, taxi driver)
- Military, emergency services (e.g., police, firefighter), or security
- Other (Specify: _____)
- Unknown

17. Is/was this a full-time position (30 hours or more per week) or a part-time position (less than 30 hours per week)?

- Full-time
- Part-time
- Other (Specify: _____)

18. [OPTIONAL] About how much was your take-home pay per week in this position?

\$_____ (round to dollars, no cents)