Vocational Profile

Your name:

Name of Job Coach: (or person helping you now)

Date profile started:

1: BACKGROUND INFORMATION

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Name:



Date of Birth:



Address:



Mobile phone number:



Home phone number:



Email address:



Who do you live with?



What school do you or did you go to?

What college do you or did you go to?



Have you got any qualifications or certificates?

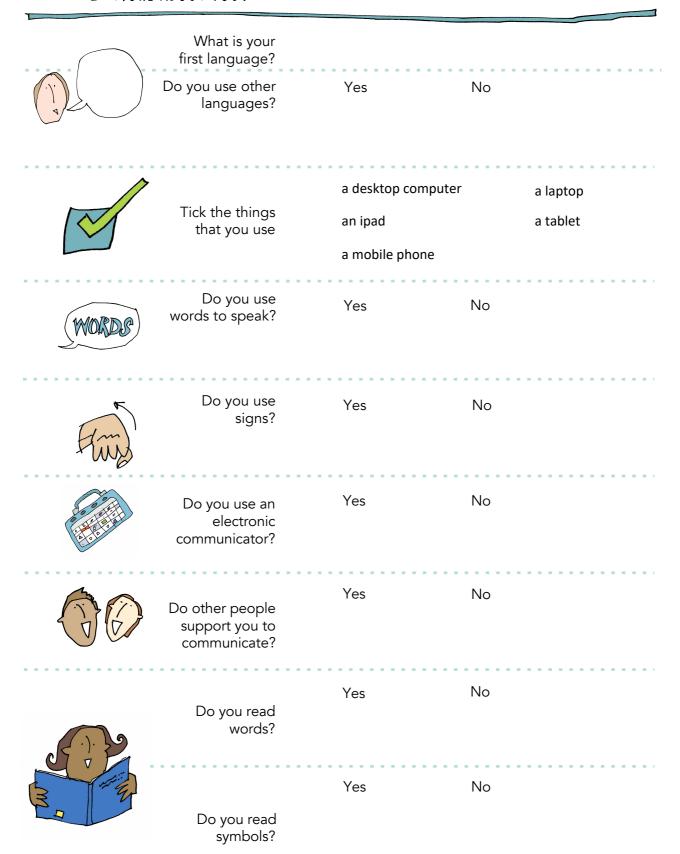


Which benefits do you get?

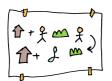


Who would you call in an emergency?

2: MORE ABOUT YOU.



Yes No



Do you use pictures?



Is there anything else that is important to you about your communication?

3: WHAT DO YOU ENJOY?



What are your interests and or hobbies?



What do you enjoy doing at school or college?



What do you enjoy doing outside of school or college?

ou do

Do you like being outdoors a lot or do you prefer to be indoors mostly?

Outdoors

Indoors



Are there things that you do at school, college or outside that you don't enjoy?

What do you prefer?



Are you an early morning person or better later in the day?

4: THINGS YOU MAY NEED SUPPORT WITH AT WORK.



Do you take any medication?

Yes

No

No

If so what do you take?

Can you take your own medication

Yes

With some help

No

Yes



Do you have any behaviours that people need to be aware of and what triggers these?

Do you have any

that apply to you)

difficulty with: (Tick the ones

Standing for a long time

Sitting for a long time

Walking

Kneeling

Lifting

Carrying

Using your hands

Balance



Do you have any issues with the following: (Tick the ones that apply to you) Allergies

Sight

Hearing

Smells

Taste

Touch

Being in crowded places

What needs to be in place to keep you healthy and safe?

5: WHAT OF THE FOLLOWING ARE IMPORTANT IN YOUR LIFE?



Di	iet:	
Clothin	ıg:	
Festivals an holiday		
Religio observation	ous ns:	
Anything else	se?	

6: HOW DO YOU TRAVEL?

Choose from the drop down list:

Car

Cycle

Taxi

Walk

Have you had any support to travel as independently as possible?

Yes

No



7: HOW DO YOU USE MONEY?

Types of money

Cash

Card

Choose from the drop down list

Cashpoint

Phone or online banking



8: HOW DO YOU TELL THE TIME?



Tick the boxes that apply to you.

Other people make sure you know the time and get where you need to be.

You use your phone to tell the time

You use a watch

You understand 24 hour way of telling the time

You understand the 12 hour clock way of telling the time



9: THINKING ABOUT GETTING A JOB AND PLANNING YOUR CAREER

What jobs do people you know do?

At school or college have you visited a work place?

Yes

No

If so what did you enjoy and find out?

Have you done work experience?

Yes

No

If so what was your work experience and how did you find it?

TO HELL

Yes

No

Have you done some volunteering? If so where was this and how was it?

Yes

No

Have you done a Supported Internship? If so where was this?

Yes

No

Have you done any paid work?



If you have done work experience, volunteering or paid work, what support did you get?

10: PLANNING FOR YOUR JOB AND CAREER



Have you thought about the kind of job you would like when you leave education? If so what ideas do you have?

Yes No



You may be thinking about being self employed. These are the kind of things people do who work for themselves:

Tick the ones that interest you

Recycling Dog walking Performing arts

Training other about disability equality

Selling jewellery and accessories

Doing cosmetic parties

11. OTHER THINGS THAT ARE IMPORTANT TO YOU ABOUT GETTING A JOB OR ABOUT IDEAS YOU HAVE FOR YOUR FUTURE CAREER?

Have you ever thought about what your dream job may be?
If so what is it?
Or maybe you have lots of ideas.
Can you share them?



Anything else?