

ELIGIBILITY FOR TRANSITIONAL JOBS ACTIVITY

Social Security	Name	Initial	Last Name	Mother's Surname

ELIGIBILITY CHARACTERISTICS FOR TRANSITIONAL JOBS

Criterion 1 – Time unemployed

Participant's current status Employed Full-time Part time
 Unemployed Time unemployed
 Last employer's letter Unemployment
 Self-certification

Comments: _____

ELIGIBLE BASED ON CRITERION 1: Yes No Lack of evidence

Criterion 2 – Inconsistent Job History

1. Employer: Position:
 Reason of termination: Duration:

2. Employer: Position:
 Reason of termination: Duration:

3. Employer: Position:
 Reason of termination: Duration:

4. Employer: Position:
 Reason of termination: Duration:

SUMMARY: JOBS LASTING LESS THAN 6 MONTHS AND NONRELATED:
 Comments: _____

ELIGIBLE BASED ON CRITERION 2: Yes No Lack of evidence

Participant's Signature	Date
Name of Authorized Official	Authorized Official's Signature