



## YOUTHBUILD ASSESSMENT – CONSTRUCTION

Student Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

How did you hear about the YouthBuild (YB) program? \_\_\_\_\_

How did you hear about the YouthBuild (YB) program and what would you like to gain from the YB Program?

\_\_\_\_\_

### A. Goals, Interests, Assets and Support

#### 1. Goals

What is the main reason you want to be in the YB program? \_\_\_\_\_

Where do you see yourself a year from now? \_\_\_\_\_

Are you looking for something different in your life? \_\_\_\_\_

Do you have a hard time focusing or concentrating? \_\_\_\_\_

How would you deal with a difficult situation? \_\_\_\_\_

What do you feel is the most important thing in your life that needs work? \_\_\_\_\_

#### 2. Support System

Do you have support from a parent/guardian in your family? ☐ Yes ☐ No

How will you travel to YB every day? Do you have a plan B? \_\_\_\_\_

Do you have an alarm clock? ☐ Yes ☐ No

Do you have children? ☐ Yes ☐ No If yes,

Do you have someone to watch your children? ☐ Yes ☐ No

Do you have childcare services? ☐ Yes ☐ No If yes, what type? \_\_\_\_\_

Do you need assistance obtaining childcare services? ☐ Yes ☐ No

Do you or your family receive any benefits/services from a state agency (food stamps, W-2, etc.)? ☐ Yes ☐ No

If yes, which state agency(ies)? \_\_\_\_\_

What other financial obligations do you have (rent, food, transportation, etc.)? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## B. Educational Assessment

1. Did you receive your high school diploma, GED or HSED? ☐ Yes ☐ No

If yes **skip to Section C**

If no, did you dropout? ☐ Yes ☐ No

2. What was the last school you attended? \_\_\_\_\_
3. What school subject do you like best? \_\_\_\_\_
4. What school subject do you like least? \_\_\_\_\_
5. Is there anything preventing you from succeeding in school? ☐ Yes ☐ No If yes,  
Would you consider receiving tutoring? ☐ Yes ☐ No
6. What are your educational goals? \_\_\_\_\_
7. Are you serious about education? ☐ Yes ☐ No
8. Are you willing to put in the work needed to get your HSED? ☐ Yes ☐ No
9. Will you make this program a priority by committing to improve yourself? ☐ Yes ☐ No

## C. Work Experience

1. Do you want to learn about construction? ☐ Yes ☐ No
2. Do you like to work outside? ☐ Yes ☐ No
3. Have you ever done construction or physical labor? ☐ Yes ☐ No
4. What do you think about men and women working together on the construction site? \_\_\_\_\_
5. Have you ever been on a ladder, scaffolding or roof? Yes ☐ No ☐
6. Describe any work-related skills you possess. \_\_\_\_\_
7. What are your future employment goals?
8. \_\_\_\_\_
9. Have you taken an aptitude or employment interest test? Yes ☐ No ☐ If yes, what were the results?  
\_\_\_\_\_
10. Do you find it difficult to be interviewed? ☐ Yes ☐ No
11. Do you have an updated resume and cover letter? ☐ Yes ☐ No
12. Do you have any barriers that might prevent you from obtaining employment? ☐ Yes ☐ No

If yes, describe: \_\_\_\_\_

## D. Lifestyle

1. Do you like to work alone or with other people, please explain: \_\_\_\_\_
2. What would you do if you were paired up with someone you did not get along with, please explain: \_\_\_\_\_
- \_\_\_\_\_

3. Will you make this program a priority by committing to improve yourself? ☐ Yes ☐ No

#### **E. Legal Issues**

1. Do you have any legal or personal problems that will interfere with your YB responsibilities?

\_\_\_\_\_

#### **F. Staff Signature**

\_\_\_\_\_ Date: \_\_\_\_\_

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