## **IPS Career Profile**

Revised from the Dartmouth IPS Vocational Profile; http://dms.dartmouth.edu/dsec/resources/tools/forms/profile.doc

This from is to be completed by the Supported Education & Employment Specialist during the first few weeks of meeting with a new consumer. Sources of information include the consumer, the mental health treatment team, and with permission, family members, previous employers and previous educators.

The profile should be updated periodically as treatment progresses to add new job and educational activities.

| Client  | Name:   |
|---|---|
| Medical Record  | #:  |
| Date:   |   |
|   |   |
| Work Goal   |   |
| What is your dream job? What kind o   | of work have you always wanted to do?                     |
|   |   |
|   |   |
|   |   |
|   |   |
| What are your long-term career goals  | 5?  |
| general de general general de general |   |
|   |   |
|   |   |
|   |   |
|   |   |
| If you are in interested in work now,   | what type of job do you think you would like to have now? |
|   |   |
|   |   |
|   |   |
|   |   |
| NA/legt other thereby do you have also  | Chance the  |
| What other thoughts do you have ab  | OUL WORK?   |



| Work Experience                  |           |
|----------------------------------|-----------|
| Most recent job:                 |           |
| Job Title:                       |           |
| Employer:                        |           |
| Job Duties:                      |           |
| Start Date:                      | End Date: |
| How many hours per week?         |           |
| What did you like about the job? |           |
| What did you dislike?            |           |
| Reason for leaving the job?      |           |
| Other info about job:            |           |
| Next most recent job:            |           |
| Job Title:                       |           |
| Employer:                        |           |
| Job Duties:                      |           |
| Start Date:                      | End Date: |
| How many hours per week?         |           |
| What did you like about the job? |           |
| What did you dislike?            |           |
|                                  |           |
| Reason for leaving the job?      |           |



| Education Goal  |
|---|
| Are you interested in pursuing education or vocational training?                        |
|   |
|   |
|   |
|   |
| When did you last attend school? What school was it?                                    |
|   |
|   |
| How did you do in school?   |
|   |
|   |
| Were you in any special classes (honors classes or classes to help you learn better)?   |
| Were you in any special classes (nonors classes of classes to help you learn better).   |
|   |
|   |
|   |
| Were you ever enrolled in vocational training classes?                                  |
| Trainer you ever emolica in vocational draining classes.                                |
|   |
|   |
| What I had a Citizen a considerate Planta at a fact of the selection of the constant of |
| What kinds of things would you like to study in school when you return?                 |
|   |
|   |



What other thoughts do you have about school and education?

## School and Vocational Training Experience Most recent school attended: School grade: School name: Classes: Did you graduate? With what type of degree/certificate? What did you like about this school? What did you dislike about this school? Other info about school (e.g., grades, why did you leave this school? Did you have friends at this school?): Next most recent school attended: School grade: School name: Classes: Did you graduate? With what type of degree/certificate? What did you like about this school?

What did you dislike about this school?

Other info about school (e.g., grades, why did you leave this school? Did you have friends at this school?):



| Military Experience  Do you have any experience in the military? (If no, skip to the next section). |
|---|
|   |
| What did you do in the military? Did you receive any training?                                      |
|   |
|   |
| What years were you in the military?  |
|   |
|   |
| What type of discharge you received?  |



| Supports With whom do you live?  |
|--|
| Who do you spend time with? How often do you see or talk to them?                    |
| Who would you like to involve in your employment plan?                               |
| Who would you like to help provide supports to as you go back to work or school?     |
| Do you know people who are working?  |
| Could any of those people help you with networking (if you are interested in a job)? |

| Work Skills How have you found jobs in the past?                       |
|--|
| What work skills have you learned from other jobs?                     |
| Interests What hobbies or interests do you have?                       |
| What is a typical day like for you? What is your schedule?             |
| When do you get up each day? What is the best part of the day for you? |



| Benefits What is your current source(s) of income?  |
|---|
| Have you applied for any type of benefits such as social security? Or housing assistance? |
| Substance Use How much alcohol do you drink?  |
| How often?  |
| Is there a particular time of day?  |
| What drugs do you, or have you, used?   |
| Do you still use those drugs? How often?  |



| Criminal Record  |      |                               |
|--|------|-------------------------------|
| Have you ever been arrested?                                     |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
| If so, what were the circumstances?                              |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
| Have you ever been convicted of a crime?                         |      |                               |
|  | V    | Mindows                       |
| Type of conviction, (e.g., breaking and entering, assault, etc.) | Year | Misdemeanor, felony or unsure |
| (eigi, prediang and entering, apparati, etc.)                    |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
| Circumstances of the conviction (what happened):                 |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
|  |      |                               |
| Type of conviction,  | Year | Misdemeanor, felony or unsure |
| (e.g., breaking and entering, assault, etc.)                     |      |                               |



| Circumstances of the conviction (what happened): |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Information from Family Members:

(For example, work history, education history, strengths, how the consumer relates to others, sleep schedule)

Information from others: (previous employers, teachers or school advisors):

(For example, how the consumer performed in those settings, strengths, problems, how the consumer got along with others, followed instructions)

