

# RAPID RESPONSE SURVEY

EMPLOYER:

Date:

Location:

Please complete each question in the survey. If the question does not apply, please write N/A. Return the completed survey as instructed by your local Job Service staff OR to the Dislocated Worker Unit, Department of Labor and Industry, PO Box 1728, Helena, MT. 59624. *(obviously these instructions can be modified to fit however the local staff decides –including return to the employer)*

1. How long have you worked for this employer?

Less than 1 year      1 to 5 years      5 to 10 years      more than 10 years

2. What was your job duty/title with this employer?

3. Will you be going back to work for this employer?

4. Do you plan to retire?

Immediately \_\_\_\_\_ 1-2 years \_\_\_\_\_ 3-5 years \_\_\_\_\_ More than 5 years \_\_\_\_\_

5. Would you be interested in relocating to employment?:

Within Montana

Out of State

6. If re-employment in your occupation is uncertain, would you be interested in retraining?

If yes, please indicate occupations you wish to be trained in:

7. Will you be looking for another job?:

Within Montana?

Out of state?

8. Do you have employment skills other than those that were required for your present job?

If yes, what kind of skills?

9. What was your highest grade of school completed?

Less than 8 years      Less than 12 years      High School      Beyond High School

Post secondary degree: \_\_\_\_\_ Major: \_\_\_\_\_

10. If you have not finished high school, would you be interested in obtaining your GED?

**-OVER-**

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Location: \_\_\_\_\_

11. Have you completed an apprenticeship program?

If yes, please indicate type of apprenticeship:

12. Would you be interested in attending a college/university/technical school?

Two years or less?

More than two years?

13. Would you be interested in attending a short term skills training (6 weeks-1 year)?

What type of training?

14. Which of the following supportive services or workshops might you need:

a. Managing job loss	g. Skills upgrade training
b. Job search related (transportation)	h. Family issues (energy assistance, etc)
c. Child care	i. Relocation (to employment)
d. Retirement planning	j. Self-employment
e. Veterans benefits	k. Apprenticeship program
f. Social services	Other (specify) –

Comments: \_\_\_\_\_

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