



# IT Pathways Career Development Program Application

JFCS of Minneapolis

Please answer the questions below so we can determine which of our IT Pathways career development programs is the best fit for you. Our programs have varying eligibility criteria. The information you provide will help us assess your eligibility. If you are eligible, we will follow up requesting documentation for verification.

**All programs offer the same services, including:**

- Individualized career counseling
- Goal setting
- Job search support
- Funding for necessary training

**\*All fields are required.** If a field does not apply to you, enter **N/A**.

## **Personal Information:**

**Full Legal Name:**

**Preferred Name (if any):**

**Current Address:**

**City:**

**State:**

**Zip Code**

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## **Employment Information:**

**Current Employer(s):**

*If you are not currently employed, write "Not Employed".*

**If not currently employed, are you eligible for, receiving, or have exhausted Unemployment Insurance benefits?**      **YES**      **NO**

**If not currently employed, what date did your employment end?**

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**Annual Gross (Pre-Tax) Income: \$**

**Number of people in your tax household:**

*(Include yourself, spouse, and any minor dependents living with you.)*

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### **Eligibility Questions:**

(Please answer Yes or No)

- |   |            |           |
|---|------------|-----------|
| • Are you eligible to work in the United States?                          | <b>YES</b> | <b>NO</b> |
| • Do you identify as a person of color?                                   | <b>YES</b> | <b>NO</b> |
| • Do you have stable housing?   | <b>YES</b> | <b>NO</b> |
| • Do you have a criminal record?  | <b>YES</b> | <b>NO</b> |
| • Do you have a high school diploma or GED?                               | <b>YES</b> | <b>NO</b> |
| • Do you have a disability (chronic physical or mental health condition)? | <b>YES</b> | <b>NO</b> |
| • What is your gender?  |            |           |
| • Are you a veteran?  | <b>YES</b> | <b>NO</b> |
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### **IT Career Interests:**

Please rank the following areas from **1 (most interested)** to **7 (least interested)**. Use **0** for any area you are **not interested in at all**.

Cloud Computing & Cloud Architecture:

Cybersecurity:

Artificial Intelligence & Data Analysis:

Networking & Systems Administration:

Web Development:

Programming & Scripting:

IT Support:

**Your Interest in IT:**

In a few words or sentences, please describe your interest in the IT field.

(For example: What types of jobs are you aiming for? Are there any trainings, credentials, or training providers you're already interested in?)

**Acknowledgment & Signature**

By signing below, you confirm that the information provided is accurate to the best of your knowledge.

You understand that we will follow up with requesting documentation for verification. If you do not meet eligibility criteria or are unable to provide documentation, you may not be enrolled in a program.

**Signature:****Date:**