

RÉSO - Work and Study v.1.4, july 2015
Évaluation des besoins en REinsertion Sociale

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First Name (Please Print)

File Number

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Date of Evaluation

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Year							Month			Day	

Last Name (Please Print)

Evaluator ID Number

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1. What is your current situation?

- Registered in a study program
- On the job market
- Both working and studying
- Unemployed/not studying, specify: _____
- Other, specify : _____

2. Do you want to change this situation?

- Yes
- No
- Uncertain

If yes or uncertain, what situation would you prefer ?

- Going back to school
- Changing fields of study
- Going back on the job market
- Changing jobs or type of job
- Other, specify : _____

3. What is your highest attained level of education?

- Elementary: 1 2 3 4 5 6 7
- Secondary : I II III IV V
- Short technical program Long technical program

- Partially completed studies in a CEGEP, technical school (DEP), private college, technical institute, nursing school, or teacher training school.
- Completed studies and obtained diploma or certificate of completion from a CEGEP, technical school (DEP), private college, technical institute, nursing school, or teacher training school.
- Partially completed university undergraduate program.
- Obtained bachelor's, master's or doctorate degree

Field of study, if necessary : _____

4. a. During your lifetime, have you ever had a job?

- No **If the answer is no, go to question 5**
- Yes

b. What are the last 4 jobs that you have had (from most recent to least recent ?)	Employment termination date? (write the year and the month)			Total months	Reason for termination (see list on page 2)	Problems See list on page 2		
	Year	Month	Day			1 st	2 nd	3 nd
1. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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4. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reasons for termination

- 1 - Quit
- 2 - Layed off due to shutdown/budget restrictions
- 3 - Fired due to drug or alcohol consumption
- 4 - Fired for other reasons

Problems encountered in the workplace

(Do not read this list to the client. Indicate the appropriate number after letting the client talk freely.)

- 01 - Lateness
- 02 - Absence
- 03 - Difficulty understanding instructions
- 04 - Conflicts with colleagues
- 05 - Refusal / difficulties with authority
- 06 - Lack of speed
- 07 - Lack of skills required for the position
- 08 - Impulsiveness
- 09 - Difficulty handling pressure
- 10 - Work schedule incompatible with personal life (e.g.: children)
- 11 - Difficulty travelling/having access
- 12 - Poor working conditions
- 13 - Lack of motivation
- 14 - Lack of competency (academic or professional)
- 15 - Lack of self-confidence
- 16 - Other, specify in the "comments" section
- 17 - Drug or alcohol consumption

c. What are you job related strengths ? _____

d. Within the last three years, how many jobs have you had ?

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5. a) Do you have a resume?

- Yes
- No

b) Do you need to update/write one ?

- Yes
- No
- Uncertain

c) According to you, does the client need to update/write a resume ?

- Yes
- No
- Uncertain

6. Have you ever received employment or student counselling services ?

- Yes If so, which ones ? _____
- No
- Uncertain

7. According to you, does the client need counselling services ?

- Yes
- No
- Uncertain

Comments