



AN INITIATIVE OF THE NORTHEAST MINNESOTA OFFICE OF JOB TRAINING

STUDENT REQUEST FOR SERVICES

Return completed form to your school's guidance office.

Career EdVenture Counselors

tammy.riley@nemojt.org 218-735-6130

alysa.hackenmueller@nemojt.org 218-421-6071

MN WorkForce Center ATTN: NEMOJT

1501 HWY 71, International Falls, MN 56649

Phone: 218-283-9427 FAX: 218-283-4042

Details about each resource listed below are available – Just ask your Career EdVenture counselors Tammy and Alysa.

PLEASE CHECK THE SERVICES YOU ARE REQUESTING

Explore Careers

- Self-Assessment (interest assessments, skills assessments, work values)
- Learn about careers (career profiles, career videos, careers in demand, research industries)
- Plan your career (set career goals, what salary to expect, licensed occupations, professional development)

Find Training

- Types of training (short-term, college, certifications, apprenticeships, internships, military)
- Pay for training (How much will it cost? Find money for training, financial aid, scholarships, make a budget)
- Find your path (what's in demand? Make a training plan)

Job Search

- Plan your job search (create a plan, research employers, research salaries, online job search, what's in demand)
- Interview (Interview ready, types of interviews, interview tips, common interview questions)
- Networking (your elevator speech, informational interviews, network online)
- Find Jobs (what are job banks, state and federal job banks, employment agencies, military options, job fairs)
- Resumes and Applications (resumes, cover letters, job applications, online applications, work samples)
- Job Search Tips (not getting results, background checks, your online image, relocate)

Local Help

- Community Services (housing, food support, health care)
- Workforce Centers (job seeker services, employment and training programs, workshops)

Other _____

STUDENT NAME: _____ PHONE #: _____ EMAIL: _____

SCHOOL: _____ GRADE: _____ AGE: _____

AVAILABLE TO MEET: Before School After School During my study hall or class elective during _____ hour.

PARENT/GUARDIAN NAME(S): _____ PHONE #: _____

MAILING ADDRESS: _____

STUDENT SIGNATURE: _____ DATE: _____

For NEMOJT Office Use Only

- Notified Parent (date, method): _____
- Met with Student (date, details): _____