



JOB CORPS PLACEMENT RECORD

OMB Approval No: 1205-0035
Expiration Date: 01/31/2014

1. STUDENT ID		2A. LAST NAME		2B. FIRST NAME		2C. MI	3. SEX	4. PHONE NO.			
5A. STREET ADDRESS, CITY, STATE, ZIP CODE						5B. EMAIL					
6. SEPARATION DATE		7. DATE OF BIRTH		8. CENTER CODE	9. ASGN	10. GED		11. COMPLETION	12. GRAD STAT		
MO	DAY	YEAR	MO	DAY	YEAR						
13. STUDENT'S CTT TRAINING											
A. TAR Code			B. Title			C. TPA		D. Training Provider			
14. STUDENT'S PLACEMENT STATUS ON DATE THIS FORM COMPLETED									15. CTS CODE		
PLACEMENT STATUS:	01	One Full Time Job	06	Full Time Job/College Combo	11	OJT/Subsidized Employment	16	NP Not Seeking Placement	16. INITIAL PLACEMENT		
	02	Two Full Time Jobs	07	Part Time Job/College Combo	12	Other Training Program	17	NP Cannot Locate			
	03	One Part Time Job	08	High School / GED	13	NP Family Obligations	18	NP Other			
	04	Two Part Time Jobs	09	Post Secondary School/Training	14	NP Reentered Job Corps	21	NP Referred to One-Stop Ctr			
	05	Armed Forces	10	College	15	NP Seeking Placement	22	NP Referred to other agency			
17. JOB, SCHOOL, MILITARY OR NOT PLACED INFORMATION (FIRST)											
A. Registered Apprenticeship		B. ONET SOC		C. TPA	D. Hours	E. Hourly Wage		F. Job Title		G. JTM	
18. EMPLOYER, SCHOOL OR INSTITUTIONAL TRAINING PROGRAM (FIRST)									19. NON-PLACER Was Student Placed By NTC?		
A. Name				D. Area Code & Phone No.		F. Email					
B. Number and Street Address				E. Fax No.		G. Web Site					
C. City, State, ZIP Code											
20. PLACEMENT VERIFICATION (FIRST)											
A. CONFIRMATION OF PLACEMENT / SELF - EMPLOYMENT STATUS							C. DATE STUDENT REPORTED				
Name			Title			Phone No.		MO	DAY	YEAR	
B. OTHER/COMMENTS							D. DATE STUDENT PLACED				
							MO	DAY	YEAR		
21. NAME AND TITLE OF OFFICIAL VERIFYING PLACEMENT (FIRST)				22. SIGNATURE			23. VERIFICATION TYPE		24. DATE PLACEMENT VERIFIED		
									MO	DAY	YEAR
25. JOB, SCHOOL, MILITARY OR NOT PLACED INFORMATION (SECOND)											
A. ONET SOC		B. TPA		C. Hours		D. Hourly Wage		E. Job Title		F. JTM	
26. EMPLOYER, SCHOOL OR INSTITUTIONAL TRAINING PROGRAM (SECOND)									27. NON-PLACER Was Student Placed By NTC?		
A. Name				D. Area Code & Phone No.		F. Email					
B. Number and Street Address				E. Fax No.		G. Web Site					
C. City, State, ZIP Code											
28. PLACEMENT VERIFICATION (SECOND)											
A. CONFIRMATION OF PLACEMENT / SELF - EMPLOYMENT STATUS							C. DATE STUDENT REPORTED				
Name			Title			Phone No.		MO	DAY	YEAR	
B. OTHER/COMMENTS							D. DATE STUDENT PLACED				
							MO	DAY	YEAR		
29. NAME AND TITLE OF OFFICIAL VERIFYING PLACEMENT (SECOND)				30. SIGNATURE			31. VERIFICATION TYPE		32. DATE PLACEMENT VERIFIED		
									MO	DAY	YEAR

Job Corps Placement Record

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