

Note: We ask all Employment First participants the following questions in order to better understand your situation, to identify any possible barriers to employment, and to help you address these obstacles. The information you provide will be treated confidentially according to the guidelines established by the Nebraska Department of Health and Human Services.

1. Have you been hurt, threatened or intimidated by someone within the past year? Yes No
2. Do you feel unsafe in your current relationship? Yes No
3. During the past year, did a partner, spouse, or relative try to control you by keeping you from going to work or looking for a job? Yes No
4. During the past year, did a partner, spouse, or relative try to prevent you from spending money, getting a bank account or credit card, looking for a new place to live, or making important decisions about your life? Yes No
5. Would you be interested in more information or talking to someone about domestic violence and sexual abuse? Yes No

Client's Initials:	Date:	Case Manager's Initials:	Date:
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