

Career Counseling Services

Intake Form Date:_____

Rank:								
Last Name:			First Name:					
Email Address:		Primary Phone:				_		
Unit:		MOS:			DoD#:			
1. Ca	reer Standards Summary							
•	Have you received a CSFL Overvie	w brief?	YES	NO				
•	Have you received an Individual E Plan (IDP) Overview brief?	Development	YES	NO				
•	Have you registered with E-Benef	its?	YES	NO				
•	Do you have a resume?		YES	NO				
•	Do you have a cover letter?		YES	NO				
•	Do you have a valid driver's licens	se?	YES	NO				
2. Fina	ancial Summary							
•	Have you received a Blended Retirement System Brief?		YES	NO				
•	Have you received a Financial Lite	racy brief?	YES	NO				
•	• Do you have a 12 Month Budget?		YES	NO				
•	Are you planning to file for Unem	ployment?	YES	NO				
3. Higł	nest Level of Education?							
ŀ	High School Diploma Associates'			Bachelors'		Graduate		Other
Field of Study?			(GPA:				
4. Any	Special Certifications?							
Certification Certific		ation I	Number		Certif	ication Ex	piration	

5. Field of work you are interested in pursuing?

- 6. What was your last salary? What salary range will you be seeking?
- 7. Immediate challenges you may be facing that you want us to know about?