

Disability Employment Initiative Application Round 5 Checklist 5/2017 Final

## 1. Qualifying for Disability Employment Initiative (DEI)

Illinois workNet helps people with disabilities find employment.

Eligible DEI participants include Illinois residents

- With a disability; and
- Between the ages of 14-24
  - Ages 14-24 for the following counties: DuPage, Northern Cook

Individuals participating in this program will receive updates and information to help them reach their training and employment goals.

By completing the application you are:

- Logging into or creating an Illinois workNet account.
- Providing information that will be reviewed by DEI program staff to determine if you are eligible for the program.
- Allowing DEI program staff to view information needed to meet program requirements.

If you are under the age of 18, you will need to provide your parent or legal guardian's contact information.

By completing this application, you are agreeing to the requirements for potential participation and certifying that the information you provide is accurate to the best of your knowledge.



## 2. Preparing to Fill Out the Application

This application will give us complete information so we may begin to help you right away.

Complete the full online application or have a family member or

personal agent complete it for you.

Expect to spend between 10 - 20 minutes completing it.

You don't have to complete it all at one time. You can save it and

come back later.

Ensure that all information that you are providing is correct and accurate, as you will be required to provide documentation. Have the following information available when filling out your DEI online application.

Things to have when filling out your DEI Online Application
First, Middle, & Last Name
Email Address
Social Security Number (required if you are 18 years or older),
Date of Birth, and Address with Zip Code and Zip Code+4
Primary Phone Number & Phone Type
Gender, Ethnicity, Military Status, and Marital Status
Highest Level of Education Completed and Any Degrees,



Certificates, Licenses, or Credentials You Have Earned
Employment Status, Employment History, and Annual Income
Before Taxes
Which of the following do you think will make it hard for you to
get a job?
• Disability
• Ex-Offender
• Homeless
• Language Barrier
<ul> <li>Limited Education or Training</li> </ul>
<ul> <li>Limited Transportation</li> </ul>
• No Child Care
<ul> <li>Substance Use</li> </ul>
Do you have any of the following disabilities?
<ul> <li>Attention-Deficit/Hyperactivity Disorder</li> </ul>
<ul> <li>Blindness or Low Vision</li> </ul>
Brain Injuries
• Deaf/Hard of Hearing
Learning Disability
Medical Disability
<ul> <li>Physical Disability</li> </ul>
<ul> <li>Psychiatric Disability</li> </ul>
<ul> <li>Speech and Language Disability</li> </ul>
Did your recent employer provide you with any of the following
benefits?
Customized Employment
Flexible Hours



I	
	Health Insurance
	• Job Sharing
	• Sick Leave
	Vacation
	Work From Home
	Are you currently a Ticket to Work participant?
	Have you ever received Social Security Disability Insurance (SSDI)
	or Supplemental Security Income (SSI)?
	Do you need any special reminders to attend to your daily
	activities or chores?
	Do you take care of anyone else such as spouse, children,
	grandchildren, parents, friends, other?
	Does your disability significantly hamper your ability to work?
	Does your disability affect your ability to:
	• Dress
	• Shop
	<ul> <li>Prepare your own meals</li> </ul>
	Drive a car
	What are your immediate employment goals?
	• Full Time
	• Part Time
	• Temporary Time
	Are you working with any of the service providers listed below?
	Center for Independent Living
	Community College
	<ul> <li>Illinois Department of Employment Security (IDES)</li> </ul>
	<ul> <li>Illinois Department of Healthcare and Family Services</li> </ul>
	Illinois Department of Human Services Office of Mental
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DEE Disability marricanjobcenter	Disability Employment Initiative Application Round 5 Checklist 5/2017 Final
Health & Developmental Disabilitie	es
<ul> <li>Illinois Department of Human Serv</li> </ul>	ices Office of Vocational
Rehabilitation	
<ul> <li>Illinois Division of Rehabilitation Se</li> </ul>	ervices (IDRS)
<ul> <li>National Association on Mental Illr</li> </ul>	ness (NAMI)
<ul> <li>Special Education District</li> </ul>	
<ul> <li>Veteran's Administration (VA)</li> </ul>	
• Other	
How did you hear about Illinois workNet	?

You can also have an agent or a legal guardian fill out the application for you. The agent/legal guardian will need additional information about themselves.

Additional Information to have when filling out your DEI Online Application as an Agent/Legal Guardian	
Your First, Middle, and Last Name	
Relationship to the Customer	
Email Address	
Street Address, City, and State, Zip Code & Zip Code+4	
Primary Phone Number & Phone Type	
Are you the contact person to receive information for the	
customer?	

## Complete the Disability Employment Initiative Online Application: <u>www.illinoisworknet.com/aboutDEI</u>.



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