



### Federal Work Study Community Service Program Employer Needs Assessment

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Agency Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Website: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Business Hours: \_\_\_\_\_

1. Is your agency: \_\_\_\_\_ Non- Profit \_\_\_\_\_ For Profit

2. Agency Mission Statement:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Description of clients served:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Agency Funding Sources (check all that apply)

- Federal
- State
- County/City
- United Way
- Other ( Please explain) \_\_\_\_\_

5. Does your agency charge a fee to clients for services provided? Please explain. \_\_\_\_\_

\_\_\_\_\_

6. When does your fiscal year begin? \_\_\_\_\_ End? \_\_\_\_\_

7. Please indicate what percentage of your client base is considered low income \_\_\_\_\_%.

8. Agency's Staffing (number of positions):

- \_\_\_\_\_ Full-time paid staff
- \_\_\_\_\_ Part-time paid staff
- \_\_\_\_\_ Student employees
- \_\_\_\_\_ Volunteers

9. Did your agency hire students through a Federal Work-Study program during the 2010-2011 school year?

- Yes. If yes number of students \_\_\_\_\_
- No

10. If applicable, how well did the students meet your agency's needs? Please check one:

- Not at all
- A little
- Somewhat
- Well
- Very Well
- Additional comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Are you interested in participating in the Community Service Program each year?

- Yes
- No

12. Do you know of other departments and/or agencies we should contact? Please list their information.

Agency Name: \_\_\_\_\_  
Agency Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_ Website: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
Business Hours: \_\_\_\_\_

Agency Name: \_\_\_\_\_  
Agency Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contact Person/Title: \_\_\_\_\_ Website: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
Business Hours: \_\_\_\_\_

13. How many student work-study jobs may be available with your agency during the 2011-2012 academic year (July through June)?

2011-2012 = \_\_\_\_\_ 2012-2013 = \_\_\_\_\_

By signing, I certify that all answers given are true, accurate and complete. I understand that falsification, misrepresentation or omission of any fact(s) on this form (or any other accompanying or required documents) will be cause for denial of participation in the NLU Federal Work Study Program.

FORM COMPLETED BY (Please Print Name and Title): \_\_\_\_\_

AUTHORIZED SIGNER (Please Print Name and Title): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Thank you for your time in answering this questionnaire. Please return to:

National Louis University  
Federal Work-Study Coordinator  
1000 Capitol Drive  
Wheeling, IL 60090  
Phone: 847.947.5350  
Fax: 847.465.5894  
Email: [FWS@nl.edu](mailto:FWS@nl.edu)