



SOUTHERN NEVADA WORKFORCE INVESTMENT BOARD

DISLOCATED CLIENT SELF-STATEMENT

With my signature below, I do hereby certify that I am unlikely to return to my previous occupation (job title) as a _____

For the following reason(s):

Signature _____ Date: _____

OR

With my signature below, I do hereby certify that without the following training:

_____ I would be unable to return to the previous occupation or job: _____

Signature _____ Date: _____

Career Specialist's Signature _____ Date: _____