



# Customized Interview Worksheet

Use this form to prepare for face-to-face meetings with employers.

Name of job seeker: _____	Name of job developer: _____
Person completing form: _____	Date form completed: _____
Employer contact person: _____	Position desired: _____

Essential functions (important job duties):

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

When I discuss capabilities, I will focus on:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

When I review work history, I will focus on:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

What might interfere with the way I can perform this job? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Choose. My job developer and/or I:  **WILL** or  **WILL NOT** discuss my disability with the employer.  
Choose. If I choose to discuss my employment disability, I will disclose it:  
 **before the interview;**  **during the interview;**  **after the interview but before a job offer;**  
 **after a job offer but before starting the job;**  **after beginning the job.**

If I choose to discuss my employment disability, either because it is my preference or because it will allow me to qualify for accommodations, I will describe it as follows:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What possible reasonable accommodations can support my disability so I can best perform this job?

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Job Seeker Signature	Date	Job Developer Signature	Date
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