

## Job Corps Health Questionnaire (ETA 6-53) Documentation Guidance

The purpose of this guidance is to assist Admissions Counselors in determining what types of documentation should be requested from the applicant offered enrollment, or the applicant's provider, based on "Yes" responses to the following specific questions on the ETA 6-53. The authorization portion of the ETA 6-53 must be signed by the applicant offered enrollment and/or his or her parent or other representative (if the applicant is under 18) to request medical, mental health, oral health, substance use, or education information. The form should be witnessed by the Admissions Counselor.

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|-----------------|--|--|
| <b>KEY CODE</b> | <b>GHQ</b> = General Health Questionnaire  | <b>CCMP</b> = Chronic Care Management Plan |
|                 | <b>IEP</b> = Individualized Education Plan |  |

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|-----------|---|
| <b>8a</b> | Use General Health Questionnaire (GHQ) or, if applicant discloses a condition covered by the Chronic Care Management Plans (CCMPs), use the appropriate medical or mental health CCMP   |
| <b>8b</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8c</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8d</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8e</b> | Use the Orthodontic Care Agreement Form   |
| <b>8f</b> | Provide the DD214   |
| <b>8g</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8h</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8i</b> | Provide comments in section 11 of the ETA 6-53 and secure emergency room records  |
| <b>8j</b> | Provide comments in section 11 of the ETA 6-53. If applicant discloses oral health condition and has received treatment within the last two years, use GHQ and secure dental records  |
| <b>8k</b> | Provide comments in section 11 of the ETA 6-53. If applicant discloses mental health condition and has received treatment within the last two years, use GHQ or the appropriate mental health CCMP. If counseling and/or treatment is related to criminal behavior and/or injury to self or others, obtain all treatment records available. This may be beyond 2 years              |
| <b>8l</b> | Provide comments in section 11 of the ETA 6-53. If applicant discloses substance use disorder and has received treatment within the last two years, use GHQ   |
| <b>8m</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8n</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8o</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8p</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8q</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8r</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8s</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8t</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>8u</b> | Provide comments in section 11 of the ETA 6-53 and court records, if applicable   |
| <b>8v</b> | Provide comments in section 11 of the ETA 6-53. If applicant discloses medical, mental health, oral health, or substance use condition and has received treatment within the last two years, use GHQ or the appropriate CCMP  |
| <b>8w</b> | Provide comments in section 11 of the ETA 6-53. If applicant discloses medical, mental health, or substance use condition and has received treatment within the last two years, use GHQ or the appropriate CCMP. If counseling and/or treatment is related to criminal behavior and/or injury to self or others, obtain all treatment records available. This may be beyond 2 years |
| <b>9a</b> | Use GHQ or Sickle Cell Disease CCMP   |
| <b>9b</b> | Use Asthma CCMP   |
| <b>9c</b> | Use GHQ   |
| <b>9d</b> | Use GHQ   |
| <b>9e</b> | Use Obesity CCMP  |
| <b>9f</b> | Use Diabetes CCMP   |
| <b>9g</b> | Use GHQ   |

|            |   |
|------------|---|
| <b>9h</b>  | Use Hypertension CCMP   |
| <b>9i</b>  | Use GHQ   |
| <b>9j</b>  | Provide comments in section 11 of the ETA 6-53  |
| <b>9k</b>  | Use GHQ   |
| <b>9l</b>  | Use GHQ   |
| <b>9m</b>  | Use Seizure Disorder CCMP   |
| <b>9n</b>  | Use GHQ   |
| <b>9o</b>  | Use GHQ   |
| <b>9p</b>  | Use Sleep Apnea CCMP  |
| <b>9q</b>  | Use GHQ   |
| <b>9r</b>  | Use GHQ   |
| <b>9s</b>  | Request applicant's Individualized Education Program (IEP), including psychological assessment  |
| <b>9t</b>  | Use Attention Deficit/Hyperactivity Disorder (AD/HD) CCMP and request IEP, if applicable  |
| <b>9u</b>  | Request applicant's IEP   |
| <b>9v</b>  | Use Depressive Disorders CCMP   |
| <b>9w</b>  | Use Anxiety Disorders CCMP, Panic Disorder CCMP, or Post-Traumatic Stress Disorder CCMP   |
| <b>9x</b>  | Use Obsessive-Compulsive Disorder CCMP  |
| <b>9y</b>  | Use GHQ   |
| <b>9z</b>  | Use Schizophrenia CCMP  |
| <b>9aa</b> | Use GHQ   |
| <b>9bb</b> | Use GHQ   |
| <b>9cc</b> | Use Bipolar Disorders CCMP  |
| <b>9dd</b> | Use Borderline Personality Disorder CCMP or GHQ   |
| <b>9ee</b> | Use Autism Spectrum Disorder (e.g., Asperger's Syndrome) CCMP   |
| <b>9ff</b> | Provide comments in section 11 of the ETA 6-53. If applicant discloses mental health condition, use GHQ or appropriate mental health CCMP |
| <b>9gg</b> | Provide comments in section 11 of the ETA 6-53. If applicant discloses substance use condition, use GHQ                                   |
| <b>9hh</b> | Provide comments in section 11 of the ETA 6-53  |
| <b>9ii</b> | Provide comments in section 11 of the ETA 6-53  |

## **Mental Health Requests**

When sending requests for information on mental-health conditions, please also request the following from an applicant's provider:

- Initial intake assessment, 3 most recent treatment notes, and psychological testing, if available

## **Disability**

When sending requests for information on conditions, please also request the following from an applicant's school (e.g., public schools, therapeutic day and residential program schools, correctional program schools, etc.):

- IEPs, if available, to include evaluative data and assessments (e.g., psycho-social, psychological, neuro-psychological reports and achievement testing)
- 504 Plans, if available, to include evaluative data and assessments

This request should be for the last available IEP or 504 plan plus evaluative reports; these documents may be more than 2 years old.

**This guidance does not replace the instructions to ETA 6-53, but should be used in conjunction with the instructions as a guide for documentation.**