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| **REFERRAL FOR EMPLOMENT PROVIDER SERVICES** |
|  |
| To:       |
| Agency Name |  |  |
|  |  |  |
| Referred By:       |
| DVR Counselor | Phone |       |
|  | Date:       |  |
|  |
| **PERSONAL DATA** |
| Name:        | Date of Birth:       | Age:     |
|  |
| Address:       |
| State |      | Zip |       |
| Vocational Goal:      |
|  |
| Phone:       | Cell:       |
|  |
| Email Address:       |

I9 Verification: [ ]  Passport or [ ]  Picture ID & [ ]  Social Security Card or Birth Certificate

Work Permit [ ]

|  |  |
| --- | --- |
| Guardian:        | Phone:       |
| Relationship to the client:       |
|  |
| Emergency Contact:       | Phone:       |
| Relationship to the client:       |
|  |
| Primary Disability:       |
|  |
| Secondary Disability:       |
|  |
| Disability Priority:       |
|  |
| Financial Factors:  | SSI/SSDI (Amount)       |
|  | Maine Care       |
|  | Food Stamps (Amount)       |
|  | Other (i.e. Aspire):       |

***Counselors may cut and paste from Aware CARNS the following information***

Previous Employment, Volunteer or School Work Experiences (Please list out all experiences, lengths of experiences, & reasons for separation from the experience):

Skills Inventory (WOWI, ERS, educational skills/abilities and attainment, skills learned on jobs, at volunteer work, and/or school experiences):

Vocational Interests (WOWI, ERS, stated interests, etc):

Work Limitations/Restrictions/Barriers (length(s) of time unemployed, reasons for separation from employment, training needs, learning needs, physical barriers):

Anticipated Workplace Accommodation(s):

Legal Concerns (criminal history, restrictions, future court dates, probation requirements):

Anticipated Employment Needs (Check all that apply & Describe in full):

[ ]  Transportation [ ]  Assistive Technology [ ]  Long Term Support [ ]  Interpreting

[ ]  Passport [ ]  Picture ID [ ]  Social Security Card [ ]  Birth Certificate

Other (i.e. Childcare, Schedule, etc):

Description:

**SERVICES REQUESTED**

(Provide **only** those services specified below)

| **Service Requested**  | **Check if yes** |
| --- | --- |
| Job Development @ $40/hour | [ ]  |
| Job Seeking Skills Instruction @ $40/hour | [ ]  |
| Labor market survey @ $40/hour | [ ]  |
| Job Analysis @ $40/hour | [ ]  |
| Job Skills Training @ $40/hour | [ ]  |
| Transitional Employment Training (Psychosocial Clubhouse) @ $35/hour | [ ]  |
| Customized Employment @ $40/hour | [ ]  |
| Business Consultation@ $40/hour | [ ]  |
| Discovering Personal Genius @ $40/hour | [ ]  |
| Situational Assessment/Assessment to Hire@$35/hour | [ ]  |
| Wages for Situational Assessment @ (Varies by CRP/location) | [ ]  |
| Pre-Employment Transition Services – Job Exploration Counseling @$40/hour | [ ]  |
| Pre-Employment Transition Services – Work Based Learning Experiences @$40/hour | [ ]  |
| Pre-Employment Transition Services – Counseling on Enrollment Opportunities @$40/hour | [ ]  |
| Pre-Employment Transition Services – Workplace Readiness Training @$40/hour | [ ]  |
| Pre-Employment Transition Services – Instruction in Self-Advocacy @$40/hour | [ ]  |
| Job Coaching - Short-term @ $35/hour | [ ]  |
| Job Coaching – Supported Employment @ $35/hour | [ ]  |
| Report Writing (¼ hour increments, not to exceed 1 hour per report) @ $35/hour | [ ]  |
| Remote Area Travel @ $35/hour\*  | [ ]  |
| Job Coaching for Population Specific Certification/Competency @ $40/hour \*\*  | [ ]  |
| Job Development for Population Specific Certification/Competency @ $45/hour\*\* | [ ]  |

\*As part of CRP contract, select agencies will be provided additional funding to travel to remote areas.

 \*\* As part of CRP contract, select agencies will be provided additional funding to deliver planned services to specific populations pre-approved by central office (i.e. ASL and foreign languages)

Purpose of the Service(s) / Specific Question(s):

[ ] The Comprehensive Assessment of Rehabilitative Needs (CARNS) will be reviewed with the CRP.Comments**:**

**[ ]** The employment goal will be reviewed with the CRP, including a description of how the goal is an appropriate fit based on the CARNS and the type of work environment in which this client will have the greatest success working. Comments:

**[ ]** The Individual Plan for Employment (IPE) will be reviewed with the CRP, including a detailed description what the client is looking for in employment, as well as the VR counselor’s vision of how the CRP may best accomplish this. Comments:

Other discussion topics included:

[ ] Work-site and job modifications: Comments:

[ ] Assistive technology needs: Comments:

[ ] Training needs: Comments:

[ ]  Referral Meeting (phone or in-person) to be scheduled asap to discuss this referral:

[ ] 3 month review meeting to discuss progress will be scheduled at the Referral Meeting:

|  |
| --- |
| **ELECTRONIC SIGNATURE AGREEMENT****Consent to use Electronic Signatures:** You are agreeing to use Electronic Signatures, within this document, subject to the provisions of the U.S. E-SIGN Act (i.e., the Electronic Signatures in Global and National Commerce Act - ESIGN, [Publication 106-229](http://www.gpo.gov/fdsys/pkg/PLAW-106publ229/content-detail.html), 14 [Stat.](http://en.wikipedia.org/wiki/United_States_Statutes_at_Large) [464](http://memory.loc.gov/cgi-bin/ampage?collId=llsl&fileName=014/llsl014.db&recNum=0495), enacted June 30, 2000.     **What is an Electronic Signature:** An electronic signature can be as basic as a typed name or a digitized image of a handwritten signature.  You agree and consent the use of a key pad, mouse or other device to select an item, button, icon or similar act/action constitutes your signature, acceptance, and agreement as if actually the validity of your electronic signature; and the lack of such certification or third party verification will not in any way affect the enforceability of your signature.          |
| **VRC signature** |       |