

## Pre ETS Job Exploration Referral

Items preferred prior to assessment:

- Part 1 of Discovery Booklet completed
- Medical/Psychological/School records if available

Pre-Employment Transition Services Student:

\_\_\_\_\_

Phone number/email or best way to contact: \_\_\_\_\_

Authorized Representative name: \_\_\_\_\_

Authorized Representative contact information: \_\_\_\_\_

\_\_\_\_\_

Primary Impairment: \_\_\_\_\_

Additional Impairments:

Reason for Referral:

- Job Shadow/Business Tour
- Interest Inventory
- Labor Market Info
- Other \_\_\_\_\_

\_\_\_\_\_

List any accommodations needed:

Referring Specialist: \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>To be completed by Evaluator:</b></p> <p>Exploration Scheduled _____</p>
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