



## VR Profile for Supported or Customized Employment

11/2018

Client Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Form completion date: \_\_\_\_\_ Referring Agency: \_\_\_\_\_  
Case Manager: \_\_\_\_\_ Case Manager Contact: \_\_\_\_\_  
Guardian Name: \_\_\_\_\_ Guardian Contact: \_\_\_\_\_  
Service Coordinator: \_\_\_\_\_ SC Contact: \_\_\_\_\_  
Other Agency Involvement: \_\_\_\_\_

### **Provider Services received:**

Health Issues (include medication side-effects):

Special Accommodations Required:

Job Goal: \_\_\_\_\_

Number of hours desired: \_\_\_\_\_

Transportation/Community Access needs (current, past, or potential solutions):

### **Discovery Activities (include dates and level of support required):**

Client Interview (general interests, strengths, skills, assets):

Family Interview (Report daily routines, chores & responsibilities, tasks of interest, family provided supports, challenges, financial concern):

Family Information (snapshot of household members, family history, and neighborhood):

Observations in home or community (conditions to work best under, habits, routine, idiosyncrasies, disability challenges):

Observation of participation in a familiar activity (does well, knows how, performs independently, timeliness):

Clubs & Hobbies:

Interests & Talents:

Leisure Activities (family and friend activities):

Education (List accommodations and modifications):

**Interview with Community Support Staff:**

**Interview with School Staff:**

**Vocational Experiences (include dates and level of support required):**

Employer Tours: \_\_\_\_\_

Job Shadows: \_\_\_\_\_

School-based Experiences (include Para support):

Community Work Experiences (include Para and natural supports):

Volunteer Experience (duration and attendance): \_\_\_\_\_

Vocational training: \_\_\_\_\_

Sheltered Workshop (include time study):

Successful Considerations (supervisory & instructional strategies; environmental or task performance conditions; supports needed for successful task performance; situations to avoid):

Paid Work Experience:

Business: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates: \_\_\_\_\_ Pay: \_\_\_\_\_

Reason for Leaving:

Business: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates: \_\_\_\_\_ Pay: \_\_\_\_\_

Reason for Leaving:

Potential Employer List (Consider connections from hobbies, interests, community participation, and family):

Benefits Orientation: When: \_\_\_\_\_ Whom: \_\_\_\_\_

Other information relevant to Discovery and Supported/Customized Employment: