**Job Placement Referral Form**

Client Name:

Case ID#:

Client Contact Information:

Alternative Contact Information:

Client Email:

Rehabilitation Counselor:

Counselor Phone:

Counselor Email:

Referral Date:

**AWARE Job Ready Completed:**

**Vocational Goal:**

*All jobs must be congruent with the client’s abilities, interests and needs. Job Developers must obtain approval from the BVR Counselor before pursuing job leads in areas other than those listed, even if the client expresses a willingness to pursue alternative jobs.*

Other Acceptable Vocational Goals and/or **Specific Goal** *(if goal is “all other . . .”):*

General location (area of town, bus route etc.):

Shift Preferences:

Full time Part Time Either

Day Shift Night Shift Swing Shift Any Shift

Special Considerations:

Must have benefits Benefits not required

Lowest Acceptable Wage: $      Desired Wage: $

Activities to avoid:

Can participant pass criminal background?  Yes  No

If no, reason:

**Client Information:**

*All Assessments, Evaluations and Training are to be completed prior to being referred for job placement services.*

Functional Limitations:

Work-place accommodations needed:

Assistive Technology Anticipated? No Yes Explain:

Interpreter/Translator needed?  No  Yes Type:

Qualifications:

Highest Education:

Applicable Certificates/degree:

Applicable skills, strengths, and capabilities:

Applicable formal/informal work experience:

Other factors that may affect employment; specific employment needs; or instructions for the placement team:

**Check One:**

Non-Supported Employment  Supported Employment  Customized Employment

**Job Coaching Anticipated?** Yes No

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| **Tier 1: Self-directed/independent job search/All other services**  Virtual Job Seeking Skills Workshop  EmployNV Registration  Soft-Skills Training  Tutoring:       hours  Service Coordination:       hours  Other: | **Tier 2: Non-supported: Internal Job Development Services Needed:**  Virtual Job Seeking Skills Workshop  700-Hour Program  Virtual 700-Hour Program Workshop  Resume Development  Job Search and Placement  30-Day Employment Verification/Retention  (Counselor to complete 60/90 day)  EmployNV Registration |
| **Tier 3: Non-supported: External Job Development Services Needed:**  Job Placement Intake  Job Placement Plan Meeting  Individual/one-time Pre-Employment Job Seeking Services (select all that apply and indicate hours approved)  Applications Choose an item.  Job Search Choose an item.  Interview Skills Choose an item.  Resume Choose an item.  Job Seeking Skills Preparation Choose an item.  Special Instructions:  Job Placement  Job Coaching:       hours  30-Day Employment Verification/Retention  60-Day Employment Verification/Retention  90-Day Employment Verification/Retention | **Tier 4: Supported or Customized Employment: External Job development Services Needed:**  SE/CE Job Placement Intake  Se/CEJob Placement Plan Meeting  Individual/one-time Pre-Employment Job Seeking Services (select all that apply and indicate hours approved)  Applications Choose an item.  Job Search Choose an item.  Interview Skills Choose an item.  Resume Development Choose an item.  SE/CE Job Seeking Skills Preparation Choose an item.  Special Instructions:  Job Fit Analysis  Discovery for Customized Employment  How many hours (up to 30 hours):       hours  SE/CE Job Placement  Job Coaching:       hours  30-Day Employment Verification/Retention  60-Day Employment Verification/Retention  90-Day Employment Verification/Retention |
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