

Kentucky Office of Vocational Rehabilitation

Job Placement/PACE Closure Report

Instructions

Purpose:

The purpose of this form is to provide details of the closure from a job placement/PACE case.

Consumer

Enter the name of the consumer

Social Security Number

Enter the social security number of the consumer

Counselor

Enter the name of the counselor of the case

Date

Enter the date of the closure

Reason for Closure

Enter the reason for the closure

Employment Status

Employer

Enter the name of the employer

Address

Enter the address of the employer

Supervisor

Enter the name of the supervisor on the job

Date of Employment

Enter the date that the employment began

Wage

Enter the wage of the consumer on the job (hourly or weekly)

Job Title

Enter the job title of the consumer

Hours per week

Enter the hours per week for the consumer's job

Job Duties

Enter the job duties of the consumer on the job

Benefits

Enter the benefits of the job, especially health insurance

Job Placement/PACE Staff signature/date

Enter the signature of the job placement/PACE staff and the date the report was filled out