

Kentucky Office of Vocational Rehabilitation Eligibility Worksheet

Instructions

The purpose of the eligibility worksheet is to determine if an applicant who applies for services is not only eligible for services with the Office of Vocational Rehabilitation but also the functional limitations, priority category, and order of selection for that applicant's case.

Name: Enter the name of the applicant

Counselor: Enter the name of the counselor

Case Number: Enter the case number

Date of Eligibility Determination: Enter the date that eligibility was

determined

Major Impairment: Enter the major impairment

Major Impairment code: Enter the 4-digit code of the major

impairment

Secondary Impairment: Enter the 4-digit code of the secondary

impairment

Other Impairments: Enter any other impairments

SSI/SSDI Recipient: Check the box if the applicant's

SSI/SSDI status has been verified

Amended Date: Enter the date that the eligibility

worksheet was amended if it was

amended

Counselor Initials: Enter the initials of the counselor

Step 1: Determine Eligibility

Presumptive Eligibility

Social Security Verification Check yes or no if social security has

been verified (if no, move to Basic

Eligibility)

Intention to achieve an employment

outcome

Check yes or no if the applicant intends to achieve an employment outcome (if no, the applicant is ineligible)

If you answer both questions yes, move to Step 2.

Basic Eligibility

Physical or Mental Impairment Check yes or no if the applicant has a

physical or mental impairment

Substantial Impediment to

Employment

Check yes or no if the applicant has an impairment that constitutes or results in a substantial impediment to employment

Vocational Rehabilitation services

required

Check yes or no if vocational rehabilitation services are required for the applicant to prepare for, secure, retain, advance in, or regain employment

Intention to achieve an employment

outcome

Check yes or no if the applicant intends to achieve an employment outcome

Benefit in terms of employment

Check yes or unknown if the applicant can benefit in terms of employment

If all five answers are No, the applicant is ineligible. Stop filling out the form.

If all give answers are Yes, the applicant is considered eligible, and move onto Step 2.

Step 2: Determine Limitations to Functional Capacities

Determine limitations to functional capacities. Do the impairments listed seriously limit any of the seven functional capacities listed? Check all the appropriate functional capacities.

Attendant Factors

List any attendant factors and be

specific

Step 3: Determine if the applicant is an applicant with a significant disability

SSI/SSDI Recipients are presumed eligible. If this is the case, move onto Step 4.

Limitations Check yes or no if the applicant has an

impairment that limits one or more

functional capacities

Services Check yes or no if the applicant requires

multiple services over a period of time

If both answers are no, skip Step 4 and move onto Step 5.

If both answers are yes, the applicant has a significant disability. Move to Step 4.

Step 4: Determine if the applicant is an applicant with a Most Significant Disability

Significant Disability	Check yes or no if the applicant is
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limited in two or more of the functional

capacities

If yes, the applicant has a most significant disability. If no, the applicant has a significant disability.

Step 5: Determine the priority category

Select the priority category based on the number of functional capacities.

Step 6: Determine the order of selection

Select whether the application is eligible and accepted or eligible and out of selection.

Progress Note

Enter the eligibility progress note.