

CONSUMER INFORMATION

Name	Case Number <i>(6 digits)</i>
Employment Outcome Achieved <i>(as described or amended in the IPE)</i>	SOC Code <i>(6 digits)</i>

This outcome is consistent with your strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice; and is in the most integrated setting possible, consistent with your informed choice.

We agree that this is a satisfactory outcome, and you are performing well on the job. You have maintained the employment outcome stated above for a minimum of 90 days, are stable on the job and no longer need the services of Vocational Rehabilitation; therefore, your case is being closed.

You may contact this office at any time in the future if you require additional services to maintain your employment.

You were informed of and provided choices for Vocational Rehabilitation services. They included assessment, planning, guidance, and counseling. Additional services included:

- Assistive Technology
- Books and Supplies
- Carl D. Perkins Vocational Training Center
- Community Rehabilitation Program Services
- Community Work Transition Program
- Drivers Evaluation/Training
- Interpreter Service
- Job Placement/Retention Services
- Maintenance
- Mental Restoration
- Notetaking Service
- Personal Assistance Services
- Physical Restoration
- Supported Employment
- Technological Aids/Devices
- Tools and Equipment
- Training
- Transportation
- Uniforms
- Vehicle Modification

Other (please describe)

SUPPORTED EMPLOYMENT INFORMATION

Your case has been identified as a Supported Employment Placement. The Supported Employment provider will continue to serve you and will provide ongoing services such as adjustment, follow-up, supportive guidance and counseling, and advocacy with the employer. The provider is:

Supported Employment N/A - Your case was identified as needing Supported Employment services. Unfortunately, supported employment services were not available in your area to meet all the long-term support needs. Instead, we have identified the following services and resources to assist you with maintaining or advancing in your current job.

We agree that these resources should meet your needs unless your employment situation changes. You have been provided information on how to contact your VR Counselor should you need additional services.

SUPPLEMENTAL SECURITY INCOME (SSI-BLIND OR SSI-DISABLED) AND SOCIAL SECURITY DISABILITY INSURANCE (SSDI) RECIPIENTS:

If you are currently receiving Continuing Disability Review protection from the Social Security Administration (SSA), you have 90 days from the date of closure to assign your Ticket to Work to an Employment Network to maintain this protection.

For a list of Employment Networks or for other questions about Ticket to Work, call 1-866-968-7842 (TTY 1-866-833-2967). You can also locate Employment Networks online at: [Find Help - Ticket to Work - Social Security](http://www.choosework.ssa.gov/findhelp/) (www.choosework.ssa.gov/findhelp/).

Should you require additional services in the future, please contact this office. If you have questions or concerns that cannot be addressed by your counselor, please consult the Consumer Guide to find information on your rights and the Client Assistance Program.

Vocational Rehabilitation Counselor's Signature

Date

Printed Name

Phone Number