

Case#

**Education and Labor Cabinet
Office of Vocational Rehabilitation**

Dear _____,

You were determined eligible for Vocational Rehabilitation services on _____.

I am required to develop an Individualized Plan for Employment (IPE) with you within 90 days from your date of eligibility determination. In your case, I will be unable to do so for the following reason(s):

An IPE will be developed by _____.

If you agree that this extension of time is warranted, please sign below and return to me.

Consumer Signature

Date

Guardian Signature

Date

Thank you for your cooperation in this matter. If you have questions or concerns, please contact me

Sincerely,

_____, Counselor
Office of Vocational Rehabilitation