



**Kentucky Office of Vocational Rehabilitation  
INDIVIDUALIZED PLAN FOR EMPLOYMENT (IPE)  
Employment Outcome**

**NAME:** \_\_\_\_\_ **CASE NUMBER:** \_\_\_\_\_

**EMPLOYMENT OUTCOME ACHIEVED**

**(as described in the IPE or as amended):** \_\_\_\_\_  
**(SOC code)**

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 have been informed of the availability of post employment services. It appears that:

Post-employment services **will not** be needed

Post-employment services **will** be needed

Please specify

\_\_\_\_\_

You may contact this office at anytime 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, and guidance and counseling. Additional services included:

Mental Restoration

Books and Supplies

Job Placement/ Retention Services

CRP Services

Rehabilitation Technology

Technological Aids/Devices

Vehicle Modification

Drivers Evaluation/Training

Transportation

Tools and Equipment

CWTP

Supported Employment

Personal Assistance Services

Physical Restoration

Interpreter Service

Notetaking Service

Training

Maintenance

Uniforms

CDPVTC

Other: \_\_\_\_\_

**Supported Employment**  N/A

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.

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

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We agree that these resources should meet your needs unless your employment situation changes. You have been provided information on how to contact your rehabilitation 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, 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: [www.choosework.net/resource/jsp/searchByState.jsp](http://www.choosework.net/resource/jsp/searchByState.jsp).

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 Signature

\_\_\_\_\_  
Date

Counselor Name:

Counselor Phone Number: \_\_\_\_\_