



Job Placement Services

Direct Placement Plan

Check Appropriate Box:

- 929X-Job Seeking and Development Services
- 935X-Job Seeking and Development Services (Deaf Service)

AV#:	(7 digits)
ACCES-VR ID#:	(6 digits)
CAMS ID #:	(10 digits)

VR District Office:	Provider:
VRC Name:	NYS Fiscal System ID:
	Report Date:

Participant First Name:	Participant Last Name:
Participant Phone Number:	
Participant Email Address:	

Vocational Goal:

Barriers to Employment:

Please detail a plan for services (Describe Services, Strategies and Activities):

This may include but is not limited to workplace behavior training, job application training, job seeking skills training, interviewing skills training, and job retention skills training. It is expected that these activities conducted by the service provider would be for a minimum of ten hours monthly.

Next Steps:

The provider is required to ensure the participant is registered at the local One-Stop Career Center?

Please enter NYS OSOS ID#

VR-929X/VR-935X

Please note that an up-to-date resume is required to be submitted with the 929X/935X.

Participant Signature:

Date:

Completed By:

Qualified Staff Signature

Date

Printed Name

Title

Phone Number:

Email: