



## Job Placement Services

### 933X-Quality Wage Incentive for Provider

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:	

#### Section 1: Employment Details

Job Title:
Business Name (Employer):
Supervisor:
Start Date of Employment:
Date 90-day milestone was achieved:
Work Schedule/Hours:
Hourly Rate of Pay for the four weeks prior to achievement of 90-day milestone:

**VR-933X**

Type of Placement:       Individual    Group    Other   [Click to enter](#)  
Describe (If this is a group placement, describe how this site is considered an integrated work setting):

Benefits:

List any hiring incentives utilized (WTO, OJT, Tax Credit, etc.):

**Section 2: Hourly Wage Incentive Requirements**

a. Did the participant earn at or above \$17.00 (Region 1) \$15.70 (Regions 2 & 3) per hour during the last four weeks of employment prior to reaching the 90-day milestone?

Yes       No

Please note proof of wage is required to be submitted along with the 933x (Pay stubs or employer certification from four-week period prior to 90-day milestone).

\*The earnings level (hourly wage required to achieve this quality wage incentive) will be adjusted upward based on an increase in minimum wage occurring during the contract period. Adjustment to the required wage level will equal the amount of the increase in minimum wage.

**Completed By:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

Phone Number:

Email: