

**Job Placement Services**

**510X - Customized Employment**

**Check Appropriate Service:**

[ ]  **Job Placement Service (Submitted with 931X / 936X)**

[ ]  **Supported Employment Services (Submitted with 573X)**

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| --- | --- |
| Authorization # | Enter AV #. |
| Aware Participant ID | Enter Aware Participant ID  |

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| VR District Office: Click arrow to select office. | Vendor: Click to enter Vendor Name |
| VRC Name: Click to enter.  | SFS Vendor ID: SFS Vendor ID. |
|  | Report Date: Click to enter a date. |

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| --- | --- |
| Customer First Name: Click to enter | Customer Last Name: Click to enter |
| Customer Phone Number: Click to enter |
| Customer Email Address: Click to enter |

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| **Customized Employment Details****This is a Final Report Submitted for Payment** |
|  **Employment Goal** (as described in ACCES-VR supported employment referral or IPE): Click here to enter Employment Goal. |
|  ***Please Note:*** If this goal is different from the agreed upon goal on the referral form, indicate date of  VRC Customer and Vendor agreement to the changed goal: Insert date if needed. |
|  **Describe Employer needs that will be met through customized employment:** Click here to describe employer needs related to customized employment |
|  **Discuss how the Customer’s skills and strengths best match the employer’s needs.**Click here to describe how customer’s skills match employer needs |

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|  **Describe the job duties and the customer’s responsibilities, as negotiated with the employer.** Click here to describe customer’s skills match employer needs. |

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|  **Indicate if any of the following were negotiated with the employer and developed for the**  **customer:** |
|  [ ]  Developed a customized job description based on unmet or other employer needs, aligned with the customer's needs [ ]  Developing a unique set of job duties or tasks [ ]  Determining an accessible job location [ ]  Developing a flexible work schedule  [ ]  Developing a job arrangement (such as job carving, job sharing, or a split schedule) [ ]  Negotiating and specifying any accommodations required to perform the job [ ]  Determining specifics of supervision [ ]  Other customization Please describe: Click here to enter text. |
| **Describe any additional flexible strategies that were utilized in this employment customization and the result of these efforts (Please be specific):**  |
| **Strategy** | **Result** |
| Click here to enter strategy | Result / job customization benefit |
| Click here to enter strategy | Result / job customization benefit |
| Click here to enter strategy | Result / job customization benefit |
| Click here to enter strategy | Result / job customization benefit |
| Click here to enter strategy | Result / job customization benefit |
| **Additional comments or concerns:** Click here to enter text. |

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| **Completed By:** |  |  |
| Enter staff name here. |  | Enter staff title here. |
| Printed Name |  | Title |
| Phone: Enter phone number. |  | Email: Enter email. |

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| **Supervisor** |  |  |
| Enter staff name here. |  | Enter staff title here. |
| Printed Name |  | Title |