



Job Placement Services

510X - Customized Employment

Check Appropriate Service:

□ Job Placement Service (Submitted with 931X / 936X)

□ Supported Employment Services (Submitted with 573X)

Authorization #	
Aware Participant ID	

VR District Office:	Vendor:
VRC Name:	SFS Vendor ID:
	Report Date:

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

Customized Employment Details

This is a Final Report Submitted for Payment

Employment Goal (as described in ACCES-VR supported employment referral or IPE):

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:

Discuss how the Customer's skills and strengths best match the employer's needs.

Describe the job duties and the customer's responsibilities, as negotiated with the employer.

Indicate if any of the following were negotiated with the encustomer:	nployer and developed for the	
Developed a customized job description based on unmet of with the customer's needs	r other employer needs, aligned	
Developing a unique set of job duties or tasks		
□ Determining an accessible job location		
□ Developing a flexible work schedule		
\Box Developing a job arrangement (such as job carving, job sharing, or a split schedule)		
\square Negotiating and specifying any accommodations required to perform the job		
Determining specifics of supervision		
□ Other customization		
Please describe:		
Describe any additional flexible strategies that were utilize	d in this employment customization	
and the result of these efforts (Please be specific):		
Strategy	Result	

Additional comments or concerns:

Completed By:

Printed Name

Phone:

Supervisor

Printed Name

Title

Email:

Title