

Phone Number:

Email Address:

VR-959X (6/17) VR-563X (6/17) VR-964X (6/17)

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

Job Placement Services

Check Appropriate Box (Report Each	Service Separately):		
 Coaching Supports for Employment − 959X Coaching Supports for Employment - Deaf Service − 563X Work-based Coaching Supports for Employment - Students − 964X 			
VR District Office:	Provider:		
VR Counselor Name:	Service Date: Month: Year:		
Consumer Name: First: Middle	e: Last:		
Consumer Phone Number:			
Consumer Email Address:			
SERVICE IN	FORMATION .		
Total Number of Hours Authorized for 959X Total Number of Hours Authorized for 563X Total Number of Hours Authorized for 964X Total Number of Hours Provided this Month Total Number Used to Date:	• •		
(Provide detailed description of services provided thours, barriers addressed and/or ongoing issues to rigustification is required.)			
Completed By: Title:			

Date: