New York State Department of Education Office of Adult Career and Continuing Education Services-Vocational Rehabilitation Pre-Employment Transition Services for Potentially Eligible Students with Disabilities

WORK BASED LEARNING

Student Name and Student ID:

Instructions: Complete <u>all</u> sections below and upload the completed document for review. This form must be completed and submitted electronically. Alternative formats or submissions (i.e., handwritten, mailed, or facsimiled copies) will not be accepted, and may delay payment processing.

Once all four activities in the category of <u>Work Based Learning</u> have been provided to the student please submit this completed form for payment. Failure to do so within 30 of days of the contract quarter end may result in non-payment of services.

Section 1: Activity Summary

Please note that all four activities must be provided before submission of this form. Do not submit any activity individually. If an activity continues into a second session, also complete line b for that activity.

	Name of Activity	Date	Time In	Time Out	Staff Initial
1.		a.			
		b.			
2.		a.			
		b.			
3.		a.			
		b.			
4.		a.			
		b.			

Section 2: Activity Detail

Please describe each activity listed above in detail.

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WORK BASED LEARNING-Continued

Section 3: Services Provided

Please check all services that were provided to the student this quarter. Individual Group

Developed work sites aligned with student interests

Provided local volunteer opportunities for students

Conducted work based learning evaluations of student performance

Provided opportunities for internships, apprenticeships, fellowships (not registered or pre-apprenticeships)

Supported students to participate in career competitions

Coordinated informational interviews to research employers

Conducted work-site tours to learn about necessary job skills in various business settings

Provided job shadowing and mentoring opportunities in the community

Other: Please Specify

How did the student benefit from the services provided? How does the student perceive (s)he benefited?

Section 4: Next Steps

What additional Pre-Employment Transition Services (Pre-ETS) does this student need? Check all titles that apply.

Instruction in Self-Advocacy

Job Exploration Counseling

Workplace Readiness Training to Develop Social Skills and Independent Living

Work-Based Learning

Counseling on Opportunities for Enrollment in Comprehensive Transition or Post-Secondary Education

Programs at Institutions of Higher Learning

I hereby certify that the data submitted on this document is true and correct and supported by the Service Provider's internal records.

Vendor Staff Signature: