



Department of **DISABILITY & AGING**

EMPLOYMENT INFORMED CHOICE EXEMPTION

Member's Name: _____

The member listed above is exempt from the Employment Informed Choice process due to one of the following options.

Please select all that apply:

- ☐ Retired (age 62 or older)
- ☐ Currently working in Individualized Integrated Employment or Individualized Integrated Self-Employment (with or without support services)
- ☐ Employment Support received or currently receiving in the current Calendar Year

Please select all that apply:

- ☐ 1915(c) Pre-Employment Support
- ☐ Vocational Rehabilitation Services
- ☐ Post-Secondary Education Program
- ☐ Tennessee College of Applied Technology (TCAT)
- ☐ Internship
- ☐ Exploration service completed within the last year
- ☐ Project Search
- ☐ Other (Please specify): _____

Please complete the form by signing below.

ISC/CM Signature: _____

Date: _____

ISC/CM Printed Name: _____

ISC Agency (if applicable): _____