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|  | **TENNESSEE DEPARTMENT OF HUMAN SERVICES - VOCATIONAL REHABILITATION SERVICES****Customized Employment – Job Development Plan**  |

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| **VR Counselor Name:** Click or tap here to enter text. |
| **Supported Employment Case?** [ ] **Yes** [ ]  **No** |

|  |  |
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| **Customer Name:** Click or tap here to enter text. | **CRP Agency Name:** Click or tap here to enter text. |

**1. Who in the customer’s life can help with creating this job development plan and using their personal connections to assist the customer to find employment?**

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| **Key People to Engage**  | **Name(s) and Contact Information** |
| Legally Appointed Conservator or Guardian |       |
| Family Members Who Are Very Involved with Customer |       |
| Friends Who Are Very Involved with Customer |       |
| Other Members of the Community |       |
| Other Colleagues or Allies of the Job Developer |       |

**2. Employment Goal(s)**

*“Appropriate” means fitting given the customer’s interests and skills/abilities.*

|  |  |  |  |
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| **Customer’s Strong Interests Applicable to Competitive Integrated Employment** | **Customer’s Most Marketable Skills and Abilities Related to Each Strong Interest**(**List All)** | **Examples of Appropriate Job Duties/Tasks that Match the Strong Interest and Related Marketable Skills and Abilities** (**List All)** | **Examples of Possible/Related Job Titles Which Could be Customized to Meet Customer’s Interests** (**List All)** |
|       |       |       |       |
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*Maximum of five (5) strong interests to ensure Job Development is focused enough to produce a successful outcome.*

**3. Essential Conditions and Preferences for Employment Success**

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| **Type of Condition** | **Essential Conditions Necessary for Success of this Customer** | **Preferences (Desired but not Essential)** |
| **Work Schedule: Hours/Days/****Times of Days** |       |       |
| **Location/Distance from Home** |       |       |
| **Physical Accessibility** |       |       |
| **Type of Work Environment** |       |       |
| **Supervisor Traits** |       |       |
| **Co-Worker Traits** |       |       |
| **Reasonable Accommodations****(including Assistive Technology)** |       |       |
| **Employer Flexibility** |       |       |
| **Personal Care-Related Conditions** |       |       |
| **Job Coach Traits or Training** |       |       |
| **Other Essential Conditions** |       |       |

**4. Job Development Plan**

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| **Examples of Appropriate Job Duties/Tasks that Match the Strong Interest and Related Marketable Skills and Abilities**From Section 2 Above | **Examples of Possible/Related Job Titles Which Could be Customized to Meet Customer’s Interests** From Section 2 Above | **Names of Local Employers Most Likely to Benefit from Hiring the Customer**Engage the customer and the customer’s family/friends in developing this plan. Consider local employers the customer and the customer’s family/friends already have an existing connection to. |
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*Duplicate page if additional rows are needed. Goal is no less than twenty (20) businesses identified.*

**5. Order of Priority for Contacting Identified Employers**

*Complete this with input and guidance from the customer and those closest to the customer.*

Using the list of local employers in column three (3) of section #4 above, reorganize the employers in order of priority:

|  |  |  |  |
| --- | --- | --- | --- |
| 1 |       | 11 |       |
| 2 |       | 12 |       |
| 3 |       | 13 |       |
| 4 |       | 14 |       |
| 5 |       | 15 |       |
| 6 |       | 16 |       |
| 7 |       | 17 |       |
| 8 |       | 18 |       |
| 9 |       | 19 |       |
| 10 |       | 20 |       |

**6. Job Development Tools To Be Utilized**

*Check all that apply.*

[ ]  Traditional Resume

[ ]  Visual Resume (including photos and/or video clips)

[ ]  Work-Related References (from prior employment, work experience/internships, volunteering)

[ ]  Character References

**Other Notes or Recommendations Related to Next Steps:**

*Include any assistance the customer may need to develop Job Seeking and Interviewing Skills, Soft Skills, etc.*

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Name of Employment Specialist Who Completed This Report:

 Click or tap here to enter text.

Signature of Employment Specialist Who Completed This Report:

Click or tap here to enter text.

Report Date: