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| --- | --- |
|  | **Tennessee Department of Human Services Vocational Rehabilitation Program**  **Customized Employment Job Development Plan** |

|  |
| --- |
| **VR Counselor Name:** |
| **Supported Employment Case?**  **Yes No** |

|  |  |  |
| --- | --- | --- |
| **Client Name:** | **SSN:** | **CRP Name:** |

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

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

1. **Employment Goal(s)**

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

|  |  |  |  |
| --- | --- | --- | --- |
| **Client’s Strong Interests Applicable to Competitive Integrated Employment** | **Client’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 Client’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.*

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

|  |  |  |
| --- | --- | --- |
| **Type of Condition** | **Essential Conditions Necessary for Success of this Person** | **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** |  |  |

1. **Job Development Plan**

|  |  |  |
| --- | --- | --- |
| **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 Client’s Interests**  From Section 2 Above | **Names of Local Employers Most Likely to**  **Benefit from Hiring the Client**  Engage the client and the client’s family/friends in developing this plan. Consider local employers, the client, and the client’s family/friends already have an existing connection to. |
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*Add more rows if needed. Goal is no less than twenty (20) businesses identified.*

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

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

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 |  |

1. **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 client may need to develop (job seeking and interviewing skills, soft skills, etc.)*

Name of Employment Specialist Who Completed This Report:

Signature of Employment Specialist Who Completed This Report:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Report Date: