

# R4 (4-weeks) Employment Report

CID#: \_\_\_\_\_

Individual's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip Code

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_  
Include Area Code Include Area Code

Contract:  **R4** Supported Employment  **R4** Employment & Retention

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

**(Complete using on-site observations, individual's reports, off-site contacts, employer contacts, team meeting discussion, etc.)**

**Please summarize the individual's current level of performance:**

**List strengths identified by the employer, EC or individual and state how they are being reinforced:**

**List any areas identified by the employer as needing improvement. Describe steps taken to address the issue(s):**

**List training and supports provided to assist the individual with maintaining employment:**

**Comment on how the individual interacts with supervisors and co-workers:**

Select "YES", "NO", or "N/A" in response to the items below:

Was the **ESS-C-185 Job Accommodation Form** updated and submitted to DRS Counselor?

Yes  No  N/A

**For SE:**

During the four (4) weeks of this service the weekly hours worked were \_\_\_\_\_ of the Weekly Work Goal of \_\_\_\_\_ hours on the IPE. Exceeds 50% \_\_\_\_\_, which is \_\_\_\_\_ %  
 Yes  No  N/A

**Highly Challenged: Yes No**

Contractor: \_\_\_\_\_ EC Name: \_\_\_\_\_

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_