

Plan for Assessments

Individual's Name: _____ Date: _____

Vocational Goal from IPE: _____

DRS Counselor: _____ Tier: 1-HC 1-Reg 2

Individualized Assessment Goals for Individual (what is the counselor requesting on referral):

For ER - Tier 2: The purpose of the Plan for Assessment is to use the individual's *Individualized Plan for* (IPE) Vocational Goal to identify at least **two (2) assessments** to be used to verify or modify the vocational goal on the Individualized Plan for Employment (IPE). The assessments may also identify the support(s) the individual will need to be successful in employment.

For SE- Tier 1 HC or 1 Reg: Two (2) situational assessments are required, the first of which should be Vocational Goal on the individual's IPE.

The Contractor will indicate with a check mark beside each assessment being recommended. Email the Plan for Assessment to the DRS Counselor for approval prior to performing the assessments.

ASSESSMENTS RECOMMENDED

The Contractor plans to conduct the following assessments Check those that apply:

Comprehensive Vocational Profile

Assessment Date:

A Customized Assessment approved by the DRS Counselor to include:

Situational Assessment(s) will be completed in an integrated employment setting lasting at least two (2) hours each. (**For SE:** first must be related to vocational goal.) (If an in-house situational assessment is used, the job must exist in the work setting and the job description must be submitted with Plan for Assessment for counselor approval before assessment begins.)

Situational Assessment Sites	Job Title/Tasks	Who is the EC Responsible?	Connection to the Vocational Goal Justify, if different	Time Frame(Hrs) (Minimum 2)
<input type="checkbox"/> *				
<input type="checkbox"/> *				
<input type="checkbox"/> *				

Check if an **in-house** situational assessment is performed to verify/modify the employment goal and identify supports that the individual may need; **must submit a job description**

Emailed the ESS-C-278—Plan for Assessment to the DRS Counselor for approval prior to performing the assessments.

EC Name: _____ Submitted Date: _____

The DRS Counselor will email the Contractor within five (5) days to approve or modify the Contractor's Plan for Assessment. **If the DRS Counselor does not respond to the Plan for Assessment within five (5) working days, the Contractor will complete the assessments as planned, unless SE and the first job title directly is NOT connected with vocational goal on individual's IPE.**

DRS Counselor comments:

Check if DRS Counselor Approval received

Approved Date: _____