

DIVISION OF VOCATIONAL REHABILITATION (DVR)
Vocational Assessment Worksheet

1. What kind of job and work setting are you hoping to find?
2. Would you like to invite others to attend your DVR meetings and/or have them assist you with this form (e.g., friend, family member, advocate, legal guardian, teacher or other VR counselor from another program)?
3. If you receive Social Security benefits, are you interested in learning more about them and how they may be impacted by going to work?
4. When you go to work, how much money will you need in your monthly budget to support yourself and/or your family?
5. Describe the labor market information that indicates this employment goal is in-demand in your local area: If it is not in-demand , what have you considered that could increase your chances of employment in this field (e.g., targeted work experience, internship, on-the-job training, relocation)?
6. What jobs have you considered in potentially high demand industries (e.g., such as computer science, healthcare, science, technology, engineering and math)?
7. What industry-specific requirements are there for your employment goal (e.g., special certification, licensing requirements, drug testing, specialized experience, etc.)?
8. Does your employment goal require a background check as a condition of employment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes , DVR requires that a background check be completed that verifies you will not be excluded from the specific job.
9. Please describe the assessments that support your employment goal (e.g., career tests, volunteer or school-based work experiences, career development class, etc.)?
10. Describe your education / training history, including licenses and certificates:
11. Do you have any specific cultural values, practices and/or preferred language needs that you would like to share with DVR prior to job search and placement?
12. Describe your previous successes and challenges obtaining and maintaining a job (e.g., work history, gaps in employment, transferrable skills, volunteer experiences, etc.)?
13. Describe your individual strengths that make this employment goal appropriate:
14. Describe your personal resources that might support your employment plan (e.g., family and social supports, transportation, etc.):
15. Describe your disability-related barriers to employment (e.g., mobility concerns, problems standing for long periods of time, communication barriers, getting along with others, memory, difficulty learning new information / tasks):

16. Describe how you are currently managing our disability-related barriers (e.g., counseling, physical therapy, skills training, support group):

17. Describe any additional barriers to employment that are not disability-related (e.g., childcare, no valid mailing address / email / phone, criminal history, transportation, housing, food assistance, etc.):

18. What services do you think you might need to reach your employment goal?

TYPES OF SERVICES	DESCRIBE
Assistive Technology (AT) (e.g., worksite evaluation, specialized computer / software, training on how to use AT devices, etc.)	
Independent Living (IL) (e.g. budgeting training, learning how to manage a schedule, managing a household/daily living needs, time-management, etc.)	
Personal Assistance Services (PAS) (PAS are services provided by a healthcare professional to assist individuals with physical disabilities, mental impairments, and other health care needs with their activities of daily living.)	
Supported Employment (SE) (SE may be for individuals who need intensive help finding and keeping work and/or on-the-job supports to keep working because of the nature and severity of the disability.)	
Transition Services (TS) (TS are services and supports for students or youth with disabilities, ages 14-24, including attending IEP / 504 plan meetings.)	
Other Services (e.g. vocational counseling/guidance, training, interview / work clothing, tools, transportation assistance, license / certification, Social Security benefits planning, etc.)	

19. When you get ready to look for work, will you need help with any of the following?

Application assistance Interview preparation One-on-one meetings to work on resume
 Cover letters Job search Online job search
 Email job leads Master application
 Referral to WorkSource (e.g., Job Hunter series, basic computer skills, Microsoft training, ex-offender services, mature worker services, youth services)
 Other:

20. Describe any additional information that supports your employment goal:

21. Your specific employment goal should be consistent with your strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.
Your specific employment goal is: