

Contractor Employee(s) to Provide IL Services and Service(s) Approved

ORGANIZATION'S LEGAL NAME		ORGANIZATION'S LEGAL NAME		
Use additional copies of this form, if needed, to list current or new employees and the services they are approved or request to provide.				
List existing employees <u>currently</u> approved by DVR to provide IL services and what services they are approved to provide.				
Employees approved through the current contract do <u>not</u> need to resubmit current resume and educational transcripts.				
FIRST NAME	LAST NAME	IL EVALUATIONS	IL SKILLS TRAINING	IL WORK-RELATED SYSTEMS ACCESS
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List <u>new employees</u> to be reviewed and approved to provide IL services and mark the services you request them to provide.				
Please include: 1) a current resume; and 2) official educational transcripts for each new employee to be reviewed. Review requirements listed on Exhibit J.				
FIRST NAME	LAST NAME	IL EVALUATIONS	IL SKILLS TRAINING	IL WORK-RELATED SYSTEMS ACCESS
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please note: A signed contract does not automatically approve the Contractor or Contractor's staff to perform IL Services. The Contractor or Contractor's staff (IL Providers) cannot provide any of the above services until official approved by authorized DVR staff.				
CONTRACTOR'S SIGNATURE		DATE	CONTRACTOR'S PRINTED NAME	
			CONTRACTOR'S TITLE	