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| --- | --- |
| Text  Description automatically generated |  Division of Vocational Rehabilitation **Exhibit E: School-to-Work Success Story** |
| Name of Student (optional) | Month and Year | Reporting County |
| Describe the student’s journey and success\* in school to work: |
| \* Success may be, for example: Job Placements, movement towards community employment, personal challenges the student was able to overcome, or getting connected to valuable community resources.  **250 words minimum or summary with a link to a video.** Exhibit E must be submitted one (1) time per county served to the DVR School-to-Work Transition Program Manager by June 30th.   |
| **This form is not valid without the following signed documents:** * DVR’s Personal Information Release form:[DSHS 16-178, Personal Information Release (wa.gov)](https://www.dshs.wa.gov/sites/default/files/dvr/Personal%20Information%20Release%20form%2016-178.pdf); and
* DSHS’s Photo Release form: [DSHS 16-235, Photo Release (wa.gov)](https://www.dshs.wa.gov/sites/default/files/forms/pdf/16-235.pdf).
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