## **Customized Employment Service**

Job Candidate Name:				
Member ID:	DOB: _			
IVRS Staff:	S Staff: Case Manager:			
	General Information			
Business/Company Name:				
Location/Address of Business:				
Telephone Number:	Startin	Starting wage:		
Title of Job:	Normal work shift hours:			
Start Date:	Hours per week:			
Status: Part-Time	Full-Time	Benefits		
Immediate Supervisor's Name:				
Employment Specialist's Name: _				
	Essential Functions of the	job		
•		nctions of this position. Essential that cannot be reassigned easily to		
<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol>				
	Unmet Needs of the jo	b		
Duties to be performed by the IVF out the essential functions of the	·	p time for other employees to carry		
1. 2. 3. 4.				

## **Customized Employment Service**

/lember ID	DOB:				
/RS Staff: _	Case Manager:				
Date of Service	Start Time:	End Time:	Unit(s) Claimed (15 min/ unit):	Description of activities (include medium provided- in person, phone call, virtual, email, etc.), employer feedback and any progress made by JC to become independent:	
RP Signatı	ıre:			Date:	