

Iowa Vocational Rehabilitation Services (IVRS)  
Pre-Employment Transition Services Agreement

**Student Demographics**

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Race  
White Yes No Native Hawaiian/Other Pacific Islander Yes No  
Black/African American Yes No Asian Yes No  
American Indian/Alaska Native Yes No

Ethnicity  
Latino/Hispanic Yes No

**Qualification for Potentially Eligible (PE)**

The student meets the following criteria to qualify as a PE student for IVRS:

Is at least 14 years old but less than age 22; and

Has a disability documented with an:

IEP,

504 Plan, or

Other documentation that supports the student as having a disability; and Is enrolled in a recognized educational program.

School Name or Description (i.e. Homeschooled): \_\_\_\_\_

Anticipated High School Graduation Date, if applicable: \_\_\_\_\_ Student State ID (SSID): \_\_\_\_\_

**Description of Anticipated Pre-Employment Transition Services (Pre-ETS)**

If the student meets the definition of PE for IVRS, then the student is able to participate in Pre-ETS. Anticipated Pre-ETS are indicated with an "X" and described (if applicable) below:

Job Exploration Counseling End Date: \_\_\_\_\_  
Comments: \_\_\_\_\_

Workplace Readiness Training End Date: \_\_\_\_\_  
Comments: \_\_\_\_\_

Counseling on Opportunities End Date: \_\_\_\_\_  
Comments: \_\_\_\_\_

Work-based Learning Experiences End Date: \_\_\_\_\_  
Comments: \_\_\_\_\_

Instruction in Self-Advocacy End Date: \_\_\_\_\_  
Comments: \_\_\_\_\_

**Signatures**

As long as the student qualifies as Potentially Eligible for IVRS or has been determined eligible for IVRS, this Agreement will be effective and new Agreements may be written, as additional services are requested and available.

**Student Acknowledgement:** I understand Pre-ETS and I agree to participate in the services described in this Agreement. I understand that Pre-ETS will be provided contingent upon local availability.

\_\_\_\_\_  
Student Signature Date

**Parent/Guardian Acknowledgement:** I agree that my student may participate in the Pre-ETS described in this Agreement. I understand that services will be provided contingent upon local availability.

\_\_\_\_\_  
Parent/Guardian Signature Date

\_\_\_\_\_  
IVRS Representative Signature Date

*Completion of the Pre-ETS Agreement outlines the agreed upon Pre-Employment Transition Services needed and is not considered an application for the vocational rehabilitation program.*

## IOWA VOCATIONAL REHABILITATION SERVICES

We gather information under the authority of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 701). Your provision of information is voluntary. A failure to supply needed information, however, may result in our inability to provide you Pre-Employment Transition services. Completion of the Pre-ETS Agreement outlines the agreed upon Pre-Employment Transition Services needed and is not considered an application for the vocational rehabilitation program.

You have the right to have all your information kept confidential. Information will only be shared consistent with federal and state laws and regulations. Information may be shared by telephone, e-mail, fax, electronic data exchange and/or U.S. mail. A release of information is not required for IVRS to obtain information needed to comply with the performance accountability requirements of section 116 of WIOA or to share information with state/federal partners who share common standards of confidentiality.

You must discuss all purchases with your IVRS counselor and receive prior written approval before making any purchases associated with your IVRS program.

You have the right to appeal or request mediation to your counselor any time you have problems with a decision or service up to and including case closure. If you are still not satisfied, you may choose to discuss the matter with your counselor's supervisor, where disagreements are often quickly resolved, or you may go directly to mediation or a hearing before an impartial hearing officer. If you choose to discuss the situation with the supervisor and are still not satisfied, you may ask for mediation or a hearing after that. Your request to appeal the decision or request for mediation must be filed within 90 days of the decision. A request for hearing is made to the Administrator of IVRS, 510 East 12th Street, Des Moines, Iowa 50319.

The Client Assistance Program (CAP) is available to help you in your relationship with IVRS. Write to CAP, Iowa Department of Human Rights, Lucas State Office Building, Des Moines, Iowa 50319; or call (toll free) 1-800-652- 4298 (Voice/TTY), or in the Des Moines area, 242-5655 (Voice/TTY).

IVRS services are provided in compliance with all applicable state and federal civil rights laws. You must be served without regard to age, race, creed, color, sex, national origin, religion, disability, ancestry, sexual orientation, gender identity, or veteran status. If you believe you have been discriminated against based on one of these reasons, you may contact the IVRS Staff Attorney, Iowa Vocational Rehabilitation Services, 510 East 12th Street, Des Moines, Iowa, 50319, (515) 281-4146 (voice), (515) 281-4211 (TTY), or toll-free (800) 532-1486.