Service Completion Report Date:

Intake Plan Meeting Date:

Last Date of Participant Service (Curriculum):      

Vendor Company Name:

Vendor Representative’s Name:

VR Participant Name:

VR Counselor Name:

DVR Purchase Order #:

1. **REASON FOR VENDOR’S SERVICE COMPLETION**  
   Please choose one:

VR Participant successfully completed the core work readiness/employability skills objectives with a Vocational and Work Adjustment Training Services Skills Appraisal Guide score of 3 or 4.

Given the VR Participant has successfully completed the VWATS Curriculum, will the VR Participant participate in a WBLE?  Yes  No

VR Participant did not successfully complete all core work readiness/employability skills objectives with a Vocational and Work Adjustment Training Services Skills Appraisal Guide score of 3 or 4 due to:

dissatisfaction with the service provision; VR Counselor or Participant requested another Vendor;

moving out of service area;

dropping out of services due to health issues;

Incarceration;

Vendor lost contact with Participant;

change in Participant's circumstances; they no longer wish to pursue employment services;

organizational or business changes by Vendor precludes further service to the Participant;

Vendor no longer willing to work with Participant;

Participant entered a drug treatment or rehabilitation facility;

VR Counselor determined services are no longer appropriate; or

Other reason for service completion (specify):

1. **SERVICE OBJECTIVES**

Based on the final Vendor Representative Monthly Appraisal Score (Exhibit G3 - Monthly Progress Report), VR Participant successfully completed all Service Objectives with a score of 3 or 4 in the following core areas as specified on the Intake Plan (Exhibit G2):

Yes No N/A

Mobility

Communication

Personal Care

Self-Direction

Interpersonal Skills

Work Tolerance

Work Skills

VR Participant did not achieve a score of 3 or 4 in one or more objectives; briefly state the objective(s) and describe barriers and/or recommendations:

Vendor Representative Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: