## HAWAII DEPARTMENT OF HUMAN SERVICES – Division of Vocational Rehabilitation Job Coaching SERVICE COMPLETION REPORT

Inta	rvice Completion Report Date: <u>12/30/23</u> ake Plan Meeting Date: <u>9/11/23</u> st Date of Participant Service: <u>12/29/23</u>			
	ndor Company Name: <u>ABC Vendor Company</u> ndor Representative's Name: <u>Robert Representative</u>			
	W/SWD Participant Name: Patty Participant			
	R Counselor Name: <u>Jane Counselor</u> R Purchase Order #: <u>07000003</u>			
1.	REASON FOR VENDOR'S SERVICE COMPLETION  Please choose one:			
	Participant did not complete the planned services 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):			
2.	SERVICE OBJECTIVES  Participant successfully completed all objectives as specified in the Intake Meeting (Exhibit E1):  Yes No N/A  Participant will complete work tasks independently  Participant will successfully complete work tasks  Other:			

07-01-2023 Page 1 of 2

## HAWAII DEPARTMENT OF HUMAN SERVICES – Division of Vocational Rehabilitation Job Coaching SERVICE COMPLETION REPORT

Participant did not achieve one or m recommendations:	nore objectives; briefly state	the objective(s) and describe barriers and/	or
Vendor Representative Signature:_	Robert Representative	Date: <u>12/30/23</u>	

07-01-2023 Page 2 of 2