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|  | **Texas Workforce Commission****Vocational Rehabilitation Services****Referral for Career Planning Assessment**   |
| **Provider Selected**  |
| **Provider name:** Employment Inc | **Referral date:** 1/2/22 |
| **Service Premiums (if any):**  [ ] Autism [ ] Brain Injury [ ] Deaf [ ] Other:       |
| **Customer Information**  |
| **Customer name:** Marhsa Wood | **Case ID:** 123456 |
| **Language preference:** English | **Date of birth:** May 23, 1998 |
| **Address:** 1507 Cedar Lane, Cear Park, Texas |
| **Phone (if any):** (512) 451-2300 | **Email (if any):** marsha.wood@gmail.com |
| **Alternate contact name (if any):** Pearl Smith | **Relation:** Grandmother |
| **Alternate contact phone (if any):** (512) 451-2300 |
| **Alternate contact email (if any):**  pearl.s@gmail.com |
| **Customer’s reported disabilities:** intellectual disability needs assistance with self-direction, work skills, and interpersonal skills.  |
| **VR Contact Information** |
| **Counselor name:** Sandra Jones |
| **Counselor phone:** (512) 562-2400 | **Counselor email:** sandra.jones@twc.texas.gov |
| **Rehabilitation Assistant (RA) name:** Candy Cane |
| **RA phone:** (512) 562-2402 | **RA email:** candy.cane@twc.texas.gov |
| **VR office name:** North Capital Area |
| **Attachments** (as applicable) |
| [x]  Benefits reports (BPQY, BSA/WIP) | [ ]  School records |
| [ ]  Case notes | [x]  Service authorization |
| [x]  Individualized Plan for Employment (IPE) | [ ]  VR3472 |
| [ ]  Medical and/or psychological records | [ ]  Waiver Plan |
| Other attachment(s):       |
| **Comments, Concerns, and Questions**  |
| **Additional comments, concerns, or questions for this referral (if any):**  |