



Texas Workforce Commission
Vocational Rehabilitation Services
Situational Assessment and Work Sample Report

General Instructions

Follow the instructions below to complete this form.

- Complete the form electronically (on the computer) and answer all questions.
- Write summaries in paragraph form in clear, descriptive English. Leave no blanks. Enter N/A if not applicable.
- Print the form, obtain signatures, and submit.
- Make certain that all standards are met before submitting this form with an invoice for payment

Note: Vocational Evaluations **cannot** be done remotely.

Provider Information

Provider:	Service Authorization Number:
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Return Report To

Counselor Name:	Fax:	
Address:	Email:	
City:	State:	ZIP:

Customer Information

Customer Name:	Case ID:	
Customer Address:	Date of Birth:	
City:	State:	ZIP code:
Primary contact number: ()	Email:	

Situational Assessments

A situational assessment is conducted at three or more competitive integrated work sites within a business or industry setting in the community. The vocational evaluator must observe the customer for a minimum of two hours per competitive integrated work site. After the customer participates in the situational assessment, record responses to the questions below.

Situational Assessment Number 1

Time spent:
Business name:
Business location:
Describe the setting:
Describe what you saw the customer do and list any skills he or she demonstrated:
Describe the customer's functional abilities and transferable skills observed during the assessment:

Describe the customer's functional limitations, challenges, and barriers observed during the assessment:

Instructions for the table below:

Record your observations for each item listed below as demonstrated by customer at the conclusion of the assessment.

Scoring Skills

Scoring is based on the level of instruction and prompting that was needed to demonstrate the skill. The scores are described below.

Excellent—skill was independently demonstrated with no instruction needed.

Good—skill was demonstrated after 1 prompt or verbal instruction.

Fair—skill was demonstrated after 2 or more prompts, verbal instructions or required visual instruction.

Poor—skill required continuous prompting and instruction, or the skill could not be demonstrated.

Category	Poor	Fair	Good	Excellent	Behavior not observed
Appropriate personal relations with supervisor					
Open and clear communication with supervisor on work site					
Comfortable interacting with supervisor					
Anxious interacting with supervisor					
Benefits from instruction from supervisor					
Cooperates with others on work tasks					
Understands and follows through on instructions					
Productivity is consistent					
Punctuality					
Grooming/Dress					
Motivation to perform tasks					
Maintains attention to tasks					
Recognizes difference between work, school, home, and recreation					
Appropriate relations with co-workers					
Works well with co-workers					
Accepts unpleasant tasks					
Organizes work					
Initiates work independently					
Adapts to change in the work setting					
Shows ability to learn					
Frustration tolerance					

Aware of workplace rules and safety rules and precautions					
Inappropriate work behaviors					

Additional comments:

Situational Assessment Number 2

Time spent:

Business name:

Business location:

Describe the setting:

Describe what you saw the customer do and list any skills he or she demonstrated:

Describe the customer's functional abilities and transferable skills observed during the assessment:

Describe the customer's functional limitations, challenges, and barriers observed during the assessment:

Instructions for the table below:

Record your observations for each item listed below as demonstrated by customer at the conclusion of the assessment.

Scoring Skills

Scoring is based on the level of instruction and prompting that was needed to demonstrate the skill. The scores are described below.

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Category	Poor	Fair	Good	Excellent	Behavior not observed
Appropriate personal relations with supervisor					
Open and clear communication with supervisor on work site					
Comfortable interacting with supervisor					
Anxious interacting with supervisor					
Benefits from instruction from supervisor					
Cooperates with others on work tasks					

Understands and follows through on instructions					
Productivity is consistent					
Punctuality					
Grooming/Dress					
Motivation to perform tasks					
Maintains attention to tasks					
Recognizes difference between work, school, home, and recreation					
Appropriate relations with co-workers					
Works well with co-workers					

Accepts unpleasant tasks

Organizes work					
Initiates work independently					
Adapts to change in the work setting					
Shows ability to learn					
Frustration tolerance					
Aware of workplace rules and safety rules and precautions					
Inappropriate work behaviors					

Additional comments:

Situational Assessment Number 3

Time spent:

Business name:

Business location:

Describe the setting:

Describe what you saw the customer do and list any skills he or she demonstrated:

Describe the customer's functional abilities and transferable skills observed during the assessment:

Describe the customer's functional limitations, challenges, and barriers observed during the assessment:

Instructions for the table below:

Record your observations for each item listed below as demonstrated by customer at the conclusion of the assessment.

Scoring Skills

Scoring is based on the level of instruction and prompting that was needed to demonstrate the skill. The scores are described below.

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Grooming/Dress					
Motivation to perform tasks					
Maintains attention to tasks					
Recognizes difference between work, school, home, and recreation					
Appropriate relations with co-workers					
Works well with co-workers					
Accepts unpleasant tasks					
Organizes work					
Initiates work independently					
Adapts to change in the work setting					
Shows ability to learn					
Frustration tolerance					
Aware of workplace rules and safety rules and precautions					
Inappropriate work behaviors					

Additional comments:

Work Samples

A minimum of four Work Samples that were not completed in the vocational evaluation must be completed. Work samples provide a close simulation of an actual industrial task, business operation, or component of an occupational area. After the customer participates in the work sample, record responses to the questions below.

Work Sample Number 1

Time spent:

Business or Industry Type:

Testing Environment:

Describe what you saw the customer do and list any skills he or she demonstrated:

Instructions for the table below:

Record your observations for each item listed below as demonstrated by customer at the conclusion of the assessment.

Scoring Skills

Scoring is based on the level of instruction and prompting that was needed to demonstrate the skill. The scores are described below.

Excellent—skill was independently demonstrated with no instruction needed.

Good—skill was demonstrated after 1 prompt or verbal instruction.

Fair—skill was demonstrated after 2 or more prompts, verbal instructions or required visual instruction.

Poor—skill required continuous prompting and instruction, or the skill could not be demonstrated.

Category	Poor	Fair	Good	Excellent	Behavior not observed
Accepted instruction regarding the work sample					
Ability to follow 2 step directions					
Ability to follow multi-step directions					
Learned without extra instruction					
Learned with extra instruction					
Demonstrated aptitude for skill					
Demonstrated aptitude for task					
Performed task without assistance					
Performed task with assistance					
Demonstrated interest in task					
Demonstrated dislike of task					
Work product met expectations					
Production time met expectations					
Task would be appropriate job task					

Describe the customer's functional limitations, challenges, and barriers observed during work sample.

Additional comments:

Work Sample Number 2

Time spent:

Business or Industry Type:

Testing Environment:

Describe what you saw the customer do and list any skills he or she demonstrated:

Instructions for the table below:
Record your observations for each item listed below as demonstrated by customer at the conclusion of the assessment.

Scoring Skills
Scoring is based on the level of instruction and prompting that was needed to demonstrate the skill. The scores are described below.

- Excellent**—skill was independently demonstrated with no instruction needed.
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Ability to follow multi-step directions					
Learned without extra instruction					
Learned with extra instruction					
Demonstrated aptitude for skill					
Demonstrated aptitude for task					
Performed task without assistance					
Performed task with assistance					
Demonstrated interest in task					
Demonstrated dislike of task					
Work product met expectations					
Production time met expectations					
Task would be appropriate job task					

Describe the customer's functional limitations, challenges, and barriers observed during work sample.

Additional comments:

Work Sample Number 3

Time spent:

Business or Industry Type:

Testing Environment:

Describe what you saw the customer do and list any skills he or she demonstrated:

Instructions for the table below:
Record your observations for each item listed below as demonstrated by customer at the conclusion of the assessment.

Scoring Skills
Scoring is based on the level of instruction and prompting that was needed to demonstrate the skill. The scores are described below.

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Learned without extra instruction					
Learned with extra instruction					
Demonstrated aptitude for skill					
Demonstrated aptitude for task					
Performed task without assistance					
Performed task with assistance					
Demonstrated interest in task					
Demonstrated dislike of task					
Work product met expectations					
Production time met expectations					
Task would be appropriate job task					

Describe the customer's functional limitations, challenges, and barriers observed during work sample.

Additional comments:

Work Sample Number 4

Time spent:

Time spent:

Business or Industry Type:

Testing Environment:

Describe what you saw the customer do and list any skills he or she demonstrated:

Instructions for the table below:
Record your observations for each item listed below as demonstrated by customer at the conclusion of the assessment.

Scoring Skills
Scoring is based on the level of instruction and prompting that was needed to demonstrate the skill. The scores are described below.

Excellent—skill was independently demonstrated with no instruction needed.
Good—skill was demonstrated after 1 prompt or verbal instruction.
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Poor—skill required continuous prompting and instruction, or the skill could not be demonstrated.

Category	Poor	Fair	Good	Excellent	Behavior not observed
Accepted instruction regarding the work sample					
Ability to follow 2 step directions					
Ability to follow multi-step directions					
Learned without extra instruction					
Learned with extra instruction					
Demonstrated aptitude for skill					
Demonstrated aptitude for task					
Performed task without assistance					
Performed task with assistance					
Demonstrated interest in task					
Demonstrated dislike of task					
Work product met expectations					
Production time met expectations					
Task would be appropriate job task					

Describe the customer's functional limitations, challenges, and barriers observed during work sample.

Additional comments:

Summary of Situational Assessments & Work Samples

Based on the information you have gathered, describe the type of jobs and/or employment goal that would be the best employment setting for the customer. Include job recommendations related to the current job market using the SOC codes for the customer's geographical area.

Based on the information you have gathered, describe the environment and work culture that would be the best employment setting for the customer.

Based on the information you have gathered, what should be avoided to identify the best employment setting for the customer?

Describe such supports as social, communication, learning, environmental, assistive technology, or other supports potentially necessary to promote customer success in competitive integrated employment.

Based on the situational assessments and work samples, would the customer most likely succeed in competitive integrated employment?

If you do not recommend competitive integrated employment for the customer explain why.

Provider Signatures

Vocational Evaluator Aide Signature

(Required for anyone who assisted in administering the evaluation)

By signing below, I, the Vocational Evaluator Aide(s), certify that:

- I maintain the staff qualifications required for a Vocational Evaluator Aide as described in the TWC VR Standards for Providers or Service Authorization ; and worked under the supervision of the Vocational Evaluator.

Typed or Printed name:

Signature:

(See VR-SFP 3 on Signatures)

X

Date Signed:

Vocational Evaluator Signature (Required for all providers)

By signing below, I, the Vocational Evaluator, certify that:

- the above dates, times, and services are accurate;
- I remained onsite to supervise all services and vocational evaluator aides maintaining the required ratios as stated in the TWC VR Standards for Providers;
- a minimum of two hours and no more than six hours of assessment each day was provided;
- I personally conducted/supervised the assessment and prepared this form;
- all Outcomes Required for Payment, as described in the TWC VR Standards for Providers and Service Authorization(s) are met;
- I and any aides maintain the staff qualifications required as described in the TWC VR Standards for Providers or Service Authorization; and
- I signed my signature and entered the date below.

Typed or Printed name:	Signature: (See VR-SFP 3 on Signatures) X	Date Signed:
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Director Credentials and Signature

By signing below, I, the Director, certify that:

- I handwrote my signature and the date below;
- I ensure that the staff meets the qualifications and met the requirements in the Standards when delivering the service; and
- I maintain the staff qualifications, including the UNTWISE credential, required for a Director, as described in TWC VR Standards for Providers and/or Service Authorization.

Qualifications	Proof of Qualification	Verified by TWS-VRS
UNTWISE Director Credential:	UNTWISE Credential Number: if no, <input type="checkbox"/> VR3490-Waiver Proof Attached	Yes No N/A

Typed or Printed name:	Signature: (See VR-SFP 3 on Signatures) X	Date Signed:
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VRS Use Only

If any question below is answered no or if the report or supporting documentation is missing or incomplete, return the invoice to the provider with the VR3460. Make a case note to document the results of the review and the date VR3460 was sent to provider, when applicable.

Technical Review to Verify Provider Qualifications

(Completed by any VR staff such as RA, CSC, VR Counselor)

Director's Credential:

UNTWISE website or attached VR3490 verifies, for the dates of service, the director listed above:
 maintained or waived the UNTWISE Director Credential
 did **not** hold a valid UNTWISE Director Credential

Verification of Service Delivery

Technical Review (completed by any VR staff such as RA, CSC, VR Counselor)

Verified that the report is accurately completed per form instructions	Yes	No
Verified that the service(s) was provided within service date of SA and as stated in the VR Standards for Providers and/or the SA	Yes	No

When applicable, verified a copy of an approved VR3472 is attached to the report.	NA	Yes	No
Verified that a total of three Situational Assessments were completed in different work settings.	Yes	No	
Verified that the appropriate fee(s) was invoiced	Yes	No	
Print staff member(s) names who completed technical review and/or verified the UNTWISE Credentials:			
1.	Date:	2.	Date:
VR Counselor Review			
Verified that a total of four Work Samples were completed and were not the same Work Samples as completed on the Vocational Evaluation.	Yes	No	
Verified that the information in all sections of the form are unique and individualized for the customer.	Yes	No	
Verified that the form indicates specific training options that match the customer's capabilities.	Yes	No	
Verified that the vocational evaluator and/or aides collected information through customer observations held at multiple locations.	Yes	No	
By typing or printing your name, the VRC verifies: <ul style="list-style-type: none"> • completion of the technical review, • services provided met the customer's individual needs, • services provided met specifications in the VR-SFP and on the SA, and • customer's or legally authorized representative's satisfaction with services received. 			
Approve to pay invoice Do not approve to pay invoice			
VR Counselor:			Date: