



Referral for Wage Services - WorkQuest

General Instructions

Instructions:

- TWS-VR staff completes this form electronically answering all questions, leaving no blanks;
- TWS-VR staff send the SA, Referral Form, and Worksite Agreement (if required) using an encrypted email with the subject line "TWC SA #xxxxxxx" to the WorkQuest email address: wageservices@uandispreadthelight.com

Referral

Date of Referral:

Customer Information

Customer name:

VRS case ID:

Date of birth:

Street address (include apartment number, if any):

City:

State:

ZIP code:

Primary contact number:

Secondary contact number:

Email address:

Customer's Alternate Contact Person Information

Alternate contact's name:

Alternate contact's relation to customer:

Alternate contact's primary contact number:

Alternate contact's secondary contact number:

Alternate contact's email:

VR Counselor Contact Information

VR counselor's name:

VR counselor's primary VRS office:

VR counselor's VRS office street address (include suite number, if applicable):

City:

State:

ZIP code:

VR counselor's primary contact number:

VR counselor's secondary contact number:

Email address:					
Rehabilitation Assistant Contact Information					
RA's name:					
RA's contact number:			RA's fax number:		
Email address:					
Referral Information					
Additional referral information, if any:					
Customer's Information					
Customer's job title:					
Wage level and customer's rate of pay:					
☐ Entry Level - \$10.90 ☐ Intermediate- \$13.92 ☐ Advanced \$20.32					
Maximum hours TWS-VR agrees to sponsor wage services each week:					
Week 1:	Week 2:	Week 3:	Week 4:	Week 5:	Week 6:
Week 7:	Week 8:	Week 9:	Week 10:	Week 11:	Week 12:
Description of any authorized change in the hours worked weeks greater than 12.					
Work Site Information					
Work site name:					
Street address (include suite number, if any):					
City:		State:		ZIP Code:	
Main phone number:					
Supervisor's (or contact person's) name:					
Supervisor's (or contact person's) title:					
Supervisor's (or contact person's) direct phone number:					
Supervisor's email address:					
Additional Comments					