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| Texas Workforce Solutions logo | **Texas Workforce Commission****Vocational Rehabilitation Services****Refusal to Participate in TWS-VRS WIOA Section 511 Required Activities**  |
| **General Instructions**  |
| This form should be completed by the TWS-VRS Point of Contact and must provided to the individual no later than 10 days after refusal to participate.  |
| **Required Fields** |
| **Last Name:**       |
| **First Name:**       |
| **Middle Name:**       |
| **Description of Refusal:**      |
| **Reason for Refusal:**      |
| **Individual’s Signature:**       | **Date:**       |
| **Guardian’s Signature:**       | **Date:**       |
| **TWS-VRS Signature:**       | **Date:**       |
| **This document was delivered**:[ ]  In person, hand-delivered[ ]  Mailed[ ]  Emailed[ ]  Faxed**Date Sent/Delivered:**       |

Refusal to participate in the required activities under *Workforce Innovation and Opportunity Act Section 511, Limitations on Usage of Subminimum Wage* may impact your ability to earn subminimum wage.