# PART B, CHAPTER 2.1: OVERVIEW OF THE VR PROCESS

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| **Policy Number** | **Authority** | **Scope** | **Effective Date** |
| Part B, Chapter 2.1 | 34 CFR [Part 361 Subpart B](https://www.ecfr.gov/current/title-34/subtitle-B/chapter-III/part-361#subject-group-ECFR8c5f55ccf5c0da2), and TWC Rule [§856 Subchapter B](https://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=40&pt=20&ch=856&sch=B&rl=Y) | All TWC-VR staff | 07/01/2025 |

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### Types of Signatures

TWC-VR customers, representatives, and/or legal guardians have multiple options to ensure required documentation is signed. TWC-VR staff will work with customers, representatives, and/or legal guardians to obtain their signatures through one of the following methods:

* Handwritten signatures (e.g., in person, photo, scanned copy);
* Digital signatures using a software option (i.e., Adobe and DocuSign, when available, on a TWC-VR form; SARA e-signatures);
* PINs as signatures entered in RHW by the TWC-VR customer, representative, and/or legal guardian; or
* SARA emailed agreement in lieu of handwritten signature.

VR staff must first make attempts to obtain a handwritten signature, digital signature or a PIN entered in RHW as a signature. If staff cannot obtain one of these signature options, they must document the reason why before using a SARA email in lieu of a handwritten signature.

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## PROCEDURES

### Signature Procedures

TWC-VR has signature procedures to ensure proper documentation and compliance. Under no circumstances does the Individualized Trial Work Plan (TWP), Individualized TWP amendment, IPE or IPE amendment take effect or allow for payment of any service until it is agreed to and signed by the customer or their representative and the VR Counselor.

When a representative signature is obtained, VR staff must ensure the Designation of Applicant or Customer Representative (VR1487) is completed and signed authorizing the representative’s authority to sign on behalf of the customer.

* Handwritten Signature: A TWC-VR customer, representative, and/or legal guardian can use a handwritten signature throughout the VR process wherever signatures are required. This includes signatures obtained in person and electronically when the customer has the equipment necessary to print, sign, and return an electronic copy of the signed form (such as a photo or scanned copy).

The customer, representative, and/or legal guardian must—

* + Review the document and contact VR if there are questions or disagreements;
  + Sign the document indicating their agreement; and
  + Return the document to VR staff upon completion of the signature.
* Digital Signatures: A TWC-VR customer, representative, and/or legal guardian can use a digital signature throughout the VR process wherever signatures are required. A digital signature can be created using software such as Adobe or DocuSign which allows customers to securely sign. SARA also allows customers to provide digital signatures.

The customer, representative, and/or legal guardian, must—

* + Review the document and contact VR if there are questions or disagreements;
  + Sign the document indicating their agreement using a digital software option (i.e., Adobe and DocuSign, when available, on a TWC-VR form; SARA signatures); and
* Return the document to VR staff upon completion of signature.
* PIN as Signature: A TWC-VR customer, representative and/or legal guardian, can use an electronic PIN as a signature in RHW throughout the VR process whenever PINS are required.

When the TWC-VR customer, representative, and/or legal guardian, sets or resets their PIN, TWC-VR staff should encourage the customer to use a number that is both easy to remember and meets the PIN requirements within RHW. When the PIN is reset by a member of the unit management team, TWC-VR staff document the action in a case note.

TWC-VR staff are prohibited from knowing or recording the customer’s unique PIN. TWC-VR staff must not ask the customer for their PIN or document any type of prompts or hints that could inadvertently compromise the confidentiality of the PIN.

* SARA Emailed Agreement in Lieu of Handwritten Signature: A TWC-VR customer, representative, and/or legal guardian, can use a SARA email in lieu of handwritten signature throughout the VR process wherever signatures are required if TWC-VR staff cannot obtain a handwritten signature, digital signature, or have the customer enter their PIN.

When using an e-mail in lieu of a signature, the email to the customer can only be sent through SARA to ensure encryption. TWC-VR staff sends an encrypted e-mail through SARA to the customer using the email address provided by the customer listed in RHW. The TWC-VR staff attaches the document and copies and pastes an approved e-mail template in the body of the email.

**SARA Email Templates**

Dear (Applicant, Customer, Parent, Guardian, or Representative Name),

Please read through the attached documents and statements below. To proceed with your case, please reply directly to this encrypted email. In your reply, please state whether you agree to the statements listed below and include your name and date.

* VR5060, Permission to Collect Information

As the applicant, customer, parent, guardian, or representative, I authorize (list provider name) to disclose the protected health information and other personal information listed under “Information Subject to Disclosure” to Vocational Rehabilitation Services (VR). I authorize the following types of records to be disclosed: (list types).

* VR5060, Permission to Collect Information from The Work Number

As the applicant, customer, parent, guardian, or representative, I authorize The Work Number to disclose the protected health information and other personal information listed under “Information Subject to Disclosure” to Vocational Rehabilitation Services (VR). I authorize the following types of records to be disclosed: Equifax The Work Number, including all employment information (i.e. wages and work history).

* VR5061, Notice and Consent for Disclosure of Personal Information

I, the applicant, customer, parent, guardian, or representative, have read the VR5061, Notice and Consent for Disclosure of Personal Information. I authorize Vocational Rehabilitation (VR) to disclose personal information or records to other individuals for purposes directly connected with the administration of my rehabilitation program.

* VR1517-2, Authorization for Release of Confidential Customer Records and Information

I, the applicant, customer, parent, guardian, or representative, authorize the records or information to be released to the individuals listed on the VR1517-2, Authorization for Release of Confidential Customer Records and Information.

* VR1510, Request for Computerized Criminal History (CCH) Search

I, the customer, have read the VR1510, Request for Computerized Criminal History Search and acknowledge that a Computerized Criminal History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers.

* VR1487, Designation of Applicant or Customer Representative

Sent to customer:

I, the applicant or customer, hereby designate (list name of person designated as the representative) to act as my representative for the purpose of rehabilitation services. He or she may act as my representative for the following purposes (list all that apply).

Sent to designated representative:

I, designated representative for customer (enter customer’s name), agree to act as a representative for the purpose of rehabilitation services for the following purposes (list all that apply). I am/am not an attorney. My telephone number and address are (enter information).

* VR5062, Permission to Collect and Notice to Disclose — Mutually Served Medicaid Waiver and VR Customers

As the applicant, customer, parent, guardian, or representative, I authorize Texas Workforce Commission (TWC) Vocational Rehabilitation Division (VR) to exchange with Texas Health and Human Services the information selected in the “Information Subject to Disclosure” box.

* VR5063, Permission to Collect and Notice to Disclose — National Student Clearinghouse

As the applicant, customer, parent, guardian, or representative, I authorize Texas Workforce Commission (TWC) Vocational Rehabilitation Division (VR) to exchange with the National Student Clearinghouse the information selected in the “Information Subject to Disclosure” box.

* VR5057, Application Statement

As the applicant, customer, parent, guardian, or representative I confirm that I have read and agree to the application statements as listed in the VR5057 Application Statement and would like to proceed with applying for Vocational Rehabilitation Services.

* VR1680, Opportunity to Register to Vote

As the applicant, customer, parent, guardian, or representative, I confirm that I have been provided with information regarding Voter Registration as described in the VR1680 Opportunity to Register to Vote. Please respond Yes, No or No Response to indicate if you are not registered to vote where you live now, would like to register to vote today.

* VR5161, Individualized Trial Work Plan/ VR5157 Individualized Trial Work Plan Amendment

As the applicant, customer, parent, guardian, or representative, I agree that I have been fully involved and used informed choice in the development of this program and have received a copy of this Trial Work Plan. This program will be reviewed by me, my designated representative, if any, and my VRC as often as necessary, but at least annually. Any change in this program will require collaboration between me, my designated representative, if any, and my VRC.

* VR5163, Individualized Plan for Employment (IPE)/VR5159 Individualized Plan for Employment (IPE) Amendment

As the applicant, customer, parent, guardian, or representative, I agree that I have been fully involved and used informed choice in the development of this program and have received a copy of this IPE. This program will be reviewed by me, my designated representative, if any, and my VRC as often as necessary, but at least annually. Any change in this program will require collaboration between me, my designated representative, if any, and my VRC.

After receiving the customer’s email confirmation, TWC-VR staff will request assistance from authorized staff to complete an Admin PIN.

* Admin PIN – Use by TWC-VR Staff: The only circumstances under which authorized TWC-VR staff can enter an Admin PIN in RHW on behalf of the customer are as follows:
  + The customer, representative, and/or legal guardian completed and signed a paper document. The following signed paper documentation must be uploaded into the electronic case file:
    - Application;
    - Voter registration;
    - Individualized Trial Work Plan (TWP);
    - Individualized TWP amendment;
    - IPE; and
    - IPE amendment.
  + A digital signature is obtained from the customer, representative, and/or legal guardian when a PIN is required in RHW;
* The customer cannot enter a PIN due to the limitations caused by a physical disability; or
* The customer, representative, and/or legal guardian cannot provide a handwritten signature, digital signature, or enter the PIN and they send an email through SARA indicating agreement for their signature on the form.

When requesting an Admin PIN, staff send an email to authorized TWC-VR staff. The email must clearly specify the document for which the PIN is requested and attach the relevant document. The authorized TWC-VR staff confirms that a customer, their representative, and/or legal guardian has provided a handwritten signature, digital signature, or SARA email in lieu of a signature. Once the Admin PIN has been entered, RHW will create a system-generated case note that records the reason and use of the Admin PIN.

The document signed by the customer, representative, and/or legal guardian that was used for the Admin PIN request must be uploaded to the electronic case file.

VR Supervisors, VR Managers, Deputy Regional Directors, or a Regional Director are the authorized TWC-VR staff who may enter an Admin PIN.

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**REVIEW**

The Policy Planning and Statewide Initiatives Team, or designee, is responsible for reviewing this policy and these procedures and will update the Document History log if necessary.

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| **Date** | **Type** | **Change Description** |
| 9/3/2024 | New | VRSM Policy and Procedure Rewrite |
| 02/10/2025 | Revised | Revised signature requirements |
| 04/01/2025 | Revised | Updated the form number for the application statement. |
| 07/01/2025 | Revised | Updated information for SARA email in lieu of a signature and updated SARA email templates. |