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| **Part I Authorized Signature** |
| Name:       | Assessment Date:       |
| Diagnosis:       |
| Acceptable source of disability eligibility*See OAR 125-055-0017(1)* | [ ]  A letter on United States Veterans Administration letterhead stating that the individual has been determined eligible for vocational services due to his or her disability;[ ]  Documentation from the Oregon Department of Human Services or a DHS designated Community Developmental Disability Program that the individual has a current disability.[ ]  Documentation from the Oregon Commission for the Blind that the individual has been determined to have a disability; [ ]  Documentation from a Qualified Mental Health Professional that the individual is determined to have mental illness. [ ]  Documentation of Disability on a DAS prescribed form signed by a Medical Professional. |
| **The individuals signing below on behalf of the organization certify and affirm that the information supplied is correct. MAKING OF A FALSE, FICTITIOUS, OR FRAUDULENT CERTIFICATION MAY RENDER THE MAKER SUBJECT TO ORS 162.085. THE ORGANIZATION WILL BE SUBJECT TO OAR 125-055-0017(3).**  |
| Oregon Forward Program Executive Signature: | Evaluator Signature: |
| Date:      | Title:      |

***Oregon Forward Contractors participating in the federal program (Ability One) with current competitive employment evaluations, do not need to fill out Parts II, III or IV of this form provided the federal evaluation is attached to this cover page.***

***[ ]  Check box to indicate you have attached an Ability One competitive employment evaluation.***

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| **Part II Work History****Assessment of Work History:** |
|       |
| **Part III Vocational Evaluation*****Identify the impairment(s) which constitute a substantial impediment to obtaining and maintaining employment.*** |
| *[ ]* Mobility *[ ]* Interpersonal skills *[ ]* Self-Direction*[ ]* Communication *[ ]* Self-Care *[ ]* Work Tolerance*[ ]* Work Skills *[ ]* Other (describe)       *(OAR 125-055-0005 (3) "Competitive Employment" means work performed by an individual in the competitive labor market on a full-time basis with no more than reasonable accommodation (as required by the Americans with Disabilities Act, 42 USC §§12101 to 12213) for which the individual is compensated within the range of customary wages and levels of benefits paid in the community for the same or similar work performed by individuals who are not disabled.* ***Describe how these impairment(s) affect the individual’s ability to maintain “Competitive Employment.”*** |
|       |
| **Part IV Specialized Employment Opportunities**  **Provided by Oregon Forward Contractor (OFC)*****Describe the supports provided by the OFC that enable this individual to maintain ongoing employment.*** |
|       |