



State of Utah  
Department of Workforce Services  
**INITIAL JOB PLACEMENT ASSESSMENT**

This document should be completed after the client completes the 5<sup>th</sup> work day. The information will serve as a resource to determine additional interventions and authorization for additional job coaching hours. This form must be submitted with the job placement milestone bill after the 5<sup>th</sup> shift along with the employer verification form.

Client Name: \_\_\_\_\_ VR Counselor: \_\_\_\_\_

CRP: \_\_\_\_\_ Date: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

**Worksite Evaluation**

Rate the following questions on a scale of 1-10:

1 - Never

10 - Always

	1	2	3	4	5	6	7	8	9	10
<b>Attendance:</b> The employee/client arrives and leaves on time and maintains proper attendance.										
<b>Time Management:</b> The employee/client takes meals and breaks appropriately.										
<b>Appearance:</b> The employee/client's grooming and hygiene are appropriate for the workplace.										
<b>Communication:</b> The employee/client uses appropriate communication skills.										
<b>Job Task Completion Rate:</b> The employee/client's performance is comparable to that of coworkers.										
<b>Job Task Quality:</b> The employee/client's work product meets the employer's standards.										

Overall appraisal of the employee/client's performance:

List any problems experienced by the employee/client:

## Natural Support Evaluation

**Recommendations:**

- Get reports from natural supports regarding progress on the job
- Identify transportation issues
- Discuss behavior at the home and interventions
- Talk with Parents/group home counselor about any problems perceived
- Observe how client interacts with natural supports

Rate the following questions on a scale of 1-10:

1 - Never

10 - Always

	1	2	3	4	5	6	7	8	9	10
Does the client enjoy the job?										
Does the client have difficulty getting ready for the job?										
Is the client motivated to earn money in the job?										
Is the client careful to maintain neat appearance when reporting to work?										
Does the client behave appropriately when outside the home?										
Does the client complain about the job?										
Is transportation to and from work a problem for the client?										
Does the client speak positively about the job with supervisors and co-workers?										

Is the client worried that he or she will lose the job for some reason?

Does the client's family have any concerns about the new job?

I understand that I am electronically signing this form, and I certify that the information on this form is correct to the best of my knowledge.

CRP Signature:  /s/ \_\_\_\_\_ Date:  \_\_\_\_\_

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