Appendix E

Example Career Counseling Services Refusal Letter

Letter date Client Name Street Address City, State, Zip

Dear (Client Name),

This letter is verification that you have refused Counseling Services provided by the Utah State Office of Rehabilitation on (Date of refusal). This service meets the 511 requirements for Career Counseling Services and is designed to provide you with information and resources to pursue employment for competitive wages. This includes information about employment resources and community programs that are available in your area to help you pursue employment for competitive wages.

Your stated reason for refusal was: (stated reason). For reference, I have attached the refusal document signed by you and/or your guardian.

While you have the right to refuse this service, it may impact your ability to maintain employment at subminimum wage. If you choose to continue working for subminimum wage, you will need to receive Career Counseling Services every six months during your first year and annually thereafter. Should you change your mind, you may contact me at (801) 887-9504 to schedule Career Counseling Services.

The Disability Law Center may also be a source of information and support as you decide what the best employment option is for you. The Disability Law Center can be contacted at 1-800-662-9080 (Voice) or 1-800-550-4182 (TTY).

Sincerely,

511 Coordinator Utah State Office of Rehabilitation