



State of Utah
Department of Workforce Services
**CONFIRMATION OF STABILITY ON THE JOB AND
DOCUMENTATION OF TRANSFER TO EXTENDED SERVICES**

Form to be completed by VR Counselor and submitted to Extended Services provider when client has reached 20 percent (or less) job coach intervention OR 24 months of ongoing services in the same job AND meets criteria for stability.

Section 1: VR COUNSELOR INFORMATION

Counselor's Name: _____

Email: _____ Phone: _____

CLIENT INFORMATION

Client Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Section 2: CLIENT EMPLOYMENT INFORMATION

Employer Name: _____ Date of Hire: _____

Employer Address: _____ Start Date: _____

Job Title: _____ Weekly Intervention Hours from CRP: _____

Hourly Wage: _____ Benefits: _____ Hours Working per Week: _____

Months client has received job coaching: _____

Section 3: CRP INFORMATION

CRP Name: _____ Contact: _____

Phone: _____ Email: _____

Additional Supports (transportation, day supports, residential, etc):

