



GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department on Disability Services
Rehabilitation Services Administration
1125 15th Street N.W. Washington, D.C. 20005
202-442-8450 ▪ www.dds.dc.gov

**SUPPORTED EMPLOYMENT
LETTER OF COMMITMENT**

ATTENTION:VR

1125 15th St. NW
Washington, DC 20005

Re:

Dear

This letter serves to inform DC DDS Rehabilitation Services Administration (DCRSA) of _____'s commitment to provide Supported Employment Extended Services to _____. Mr./Ms./Mrs. _____ is currently _____ and eligible to receive additional employment support at no additional cost to DCRSA. We understand that the person in supported employment will be monitored by DCRSA during the first 60 days of transition to extended services and we will do our best to coordinate services at that time.

For further information regarding provision of extended services _____, please feel to free to contact _____ at _____ or email at _____.

Best regards,

