

JOB COACHING PROGRESS REPORT

Person Information					
Name of Person:			Authorization number:		
Provider:			Reporting Period:		
Employment Information					
Person's job title:		Start Date:		<input type="checkbox"/> Full time <input type="checkbox"/> Part time	
Employer Name:		Address:		City, State: ZIP code:	
Hours per week: Change from last month? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, previous # hours:		Days per week: Change from last month? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, previous # days:		Hourly rate: \$ Change from last month? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, previous \$ rate:	
Job Coaching Information					
Dates of actual Job coaching: _____, _____, _____, _____, _____, _____, _____, _____, _____, _____, _____, _____,					
Frequency of Job Coaching: <input type="checkbox"/> 2x/week <input type="checkbox"/> 3x/week <input type="checkbox"/> 4x/week <input type="checkbox"/> Other					
Hours per day: <input type="checkbox"/> Reduced from last month <input type="checkbox"/> Increased from last month <input type="checkbox"/> Same					
Skill and Work Behavior Assessment					
General Directions: Please do not leave any item unanswered.					
Please rate this person based on how often the skill or behavior is demonstrated (% of the time/ OTT):					
1 Skill never/ not demonstrated	2 Rarely (up to 30% OTT)	3 Sometimes (up to 65% OTT)	4 Most of the time (up to 85% OTT)	5 Always	
Entry Level Skills			Week 1	Week 2	Week 3 Week 4
Completes work accurately					
Completes work on time					
Completes work to business standards of quality					
Follows work-related rules and regulations					
Demonstrates willingness to work					
Exhibits appropriate interpersonal skills					
Displays responsible behaviors at work					
Adheres to attendance expectations					
Demonstrates punctuality					

Manages time well				
Demonstrates organization in work activities				
Communicates well with others				
Displays appropriate hygiene				
Other:				

Comments:

<i>Related Job Retention Activities</i>	<i>Week 1</i>	<i>Week 2</i>	<i>Week 3</i>	<i>Week 4</i>
Displays initiative				
Utilizes sound coping skills (communicates, solve problems, etc.)				
Is able to learn new responsibilities				
Demonstrates ability to deal with change				
Complies with health and safety rules				
Exhibits self- direction				
Can work as part of a team				
Demonstrates willingness to take instruction				
Accepts direction and feedback from supervisor				
Displays knowledge of workplace policy and ethics				
Asks appropriate questions				
Makes sound decisions				
Other:				

Comments:

If there are limitations in any of the above areas, these concerns must be discussed with this person and the VR Specialist. A plan of corrective action should be agreed upon and implemented to ensure improvement for job retention.

JOB TASKS PROGRESS

List the job tasks required for this position and update progress from last month:

JOB TASK	PERFORMING?		ACHIEVEMENT LEVEL	BASIS
	YES	NO		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Limited <input type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Excellent	<input type="checkbox"/> Direct Observation <input type="checkbox"/> Person self-report <input type="checkbox"/> Supervisor report
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Limited <input type="checkbox"/> Average	<input type="checkbox"/> Direct Observation <input type="checkbox"/> Person self-report



			<input type="checkbox"/> Above Average <input type="checkbox"/> Excellent	<input type="checkbox"/> Supervisor report
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Limited <input type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Excellent	<input type="checkbox"/> Direct Observation <input type="checkbox"/> Person self-report <input type="checkbox"/> Supervisor report
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Limited <input type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Excellent	<input type="checkbox"/> Direct Observation <input type="checkbox"/> Person self-report <input type="checkbox"/> Supervisor report
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Limited <input type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Excellent	<input type="checkbox"/> Direct Observation <input type="checkbox"/> Person self-report <input type="checkbox"/> Supervisor report
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Limited <input type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Excellent	<input type="checkbox"/> Direct Observation <input type="checkbox"/> Person self-report <input type="checkbox"/> Supervisor report

Person Performance

Describe how this person has adjusted to his/her job, including any problematic issues or concerns that emerged and how they were addressed:

Describe the evidence to support this person's and, if applicable, this person's legal representative's (family member or other) satisfaction with the job and the work environment.

Does this person's job performance meet the business expectations?

☐ Superior
 ☐ Satisfactory
 ☐ Needs Improvement

Comments:

Identify areas of performance or behavior that require improvement and note strategies that will address these areas. Describe what types, methods, and strategies were used in training this person and the

effectiveness of the training provided:	
What new support or accommodation needs (if any) were identified during this period, and how were they addressed?	
List any changes or additions to the natural supports noted in last month's Progress report:	
How does this person work with the job coach?	
Does the employer provide regularly scheduled feedback on performance?	
NEXT STEPS:	
Signature	
I, the Job Coach, certify that: <ul style="list-style-type: none"> The above dates, times, and services are accurate; I personally provided all services or supervised the Job Skills Trainer who provided the services; I documented the services and information described above in the report. 	
First and Last name of Job Coach:	Position Title:
Signature:	Date:

Encl. Job Coaching Log



[illegible]