

Request for Pre-Employment Transition Services for Potentially Eligible Students with Disabilities

Information and Consent

Heritage Christian Services provides Pre-Employment Transition Services (Pre-ETS), as defined by the Workforce Innovation and Opportunity Act (WIOA), to a student(s) with a disability who is eligible or potentially eligible for VR services. A student with a disability is defined as an individual who is enrolled in an educational program, is between the ages of 14 and not yet 22, and who is eligible for special education and related services under IDEA **or** is an individual with a disability for the purposes of Section 504 of the Rehab Act. Heritage Christian Services in collaboration with schools and other community partners will make Pre-ETS available to students with disabilities who have a need for one or more of these services. The following information completed by school personnel should be sent along with documentation of the student’s disability for any potentially eligible students who is not currently receiving VR services.

Section I: Student Background Information (*indicates required field)

*Name (Last)	*Name (First)	M.I.	Suffix (e.g. Jr.)	*Social Security Number	
Gender ___ Male ___ Female	*Birth Date (mm/dd/yy)		*County of Residence		
*Home Address (Street)			*City	*State	*ZipCode
*Home Phone No. (10-digit) Voice TTY Video Phone			E-mail Address		
*Race/ethnicity ___ American Indian / Alaska Native ___ Hispanic / Latino ___ Asian ___ Native Hawaiian / Other Pacific Islander ___ Black / African-American ___ White			U.S. Citizen? ___ YES NO If “No” please list immigration status		
*Student’s primary disability _____			Need for auxiliary services? ___ Reader ___ Interpreter ___ Other (list below)		
Other disability related information					

Section II: Request for Pre-Employment Transition Services (all field required)

<p>There are five (5) Pre-Employment Transition Services. These services are intended to be the earliest set of services to assist students with identifying career interests and to provide the ability to practice and improve workplace skills. The student has a need for the following Pre-Employment Transition Services:</p> <p>___ Job exploration counseling – discuss career options and learn about in-demand jobs</p> <p>___ Work-based learning experiences – experience and gain more information about the workplace</p> <p>___ Counseling on opportunities post-secondary educational programs – explore training options after graduation</p> <p>___ Workplace readiness training – improve social skills and independent living skills</p> <p>___ Instruction in Self-Advocacy – learn skills needed for greater independence</p> <p>*students may elect to receive each of these services</p>

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Check which documentation of disability is included <input type="checkbox"/> IEP <input type="checkbox"/> 504 Plan <input type="checkbox"/> SSA Award Letter <input type="checkbox"/> Other diagnostic documentation Specify: _____	Currently enrolled in high school? ___ YES ___ NO Currently enrolled in post-secondary program ___ YES ___ NO Referring organization (school, college, agency, or other) _____
Grade Level: _____	Expected Graduation /Exit Date _____

Referring Staff Name	
Referring Staff E-mail	Phone No. (10-digit)
Referring Staff Position/Title	Address (Street, City, State, Zip
Signature	Date

I understand this is not an application for services from Adult Career and Continuing Education Services - Vocational Rehabilitation (ACCES-VR) or for the Commission for the Blind. The State of New York is committed to good privacy practices. As such, we are disclosing that in order to fully process your request for Pre-Employment Transition Services, Heritage Christian Services requires access to personal information about you, which will be maintained by Heritage Christian Services. By signing this form, you are requesting that Heritage Christian Services access any personal information necessary to process your request for Pre-Employment Transition Services, in order to provide these services to you. Please note that Heritage Christian Services protects any non-public, confidential personal information maintained about you from release to the public or unauthorized third party.

By signing below, I authorize ACCES-VR to obtain/release information (including school records, disability information and status of ACCES-VR process).

By signing below, I acknowledge that in completing the request for Pre-Employment Transition Services, Heritage Christian Services may obtain or release confidential personal information about me as follows:

- in collaboration with ACCES-VR vendors and Partners on my behalf
- to report my progress to the school or agency who referred me to Heritage Christian Services
- when required by law and to facilitate the administration of the Rehabilitation Act
- to other state agencies, if applicable

Heritage Christian Services does not discriminate against any applicant for services on the basis of race, color, religion, national origin/ancestry, disability, age, sexual orientation, gender, or sex veteran or military status, and/or genetic information or in any manner prohibited by law.

Signature of individual (If under 18, parent or legal guardian must also sign below):	Date
Signature of Parent or Legal Guardian, if applicable	Date
Parent or Legal Guardian Name, if applicable	Phone No.
Parent or Legal Guardian E-Mail	