**PREAMBLE: The Department of Rehabilitation Services (DORS), Bureau of Education and Services for the Blind (BESB) proposes to update the policies for the Vocational Rehabilitation (VR) Program pertaining to Order of Selection. Proposed changes seek to (1) align BESB-VR policy language and terminology with language utilized in the Workforce Innovation and Opportunity Act (WIOA) and accompanying federal regulations; (2) align BESB-VR policy language with VR policy language utilized by the Bureau of Rehabilitation Services (BRS) within DORS to provide for a uniform approach to Order of Selection policies in Connecticut; and (3) to remove language, statements and forms from BESB-VR policy that relate to procedure rather than policy.**

**KEY: Proposed additions are found as underlined text in between asterisks and proposed deletions are found as text in between brackets.**

**DRAFT**

**Chapter 2 - General Policies**

**Section 8 - Order of Selection**

**a) Requirements and Implementation**

**When funding projections indicate that the Vocational Rehabilitation Program cannot provide services to all eligible individuals,\*in addition to all students with disabilities who are receiving Pre-Employment Transition Services prior to being determined eligible for vocational rehabilitation services,\* Federal Law requires the Program to establish an order to be followed for selecting eligible individuals to whom vocational rehabilitation services shall be provided on the basis of serving first, individuals with the most significant disabilities.**

**Individuals who were receiving Pre-Employment Transition Services as a student with a disability prior to being determined eligible for vocational rehabilitation services, eligible individuals who require specific services or equipment to maintain employment, or those individuals who have already begun receiving services under an Individualized Plan for Employment prior to the effective date of the Bureau’s order of selection, shall not be impacted by a decision of the Bureau to enter into an order of selection and shall continue to receive services as required for pre-employment transition planning, or as outlined in the Individualized Plan for Employment or subsequent amendments.**

**\*Prior to implementing an order of selection, the State Director shall notify the State Rehabilitation Council, the Commissioner of the Department of Rehabilitation Services and the Advisory Board, for their consideration and recommendations. A duly noticed public comment period and public hearing that allows for input on any proposed modification(s) to the applicable section of the Unified State Plan or Bureau policies to address the projected funding shortfall shall be provided. Should no alternatives be identified to ensure adequate funding to remedy the projected shortfall, the order of selection shall be implemented.\***

**\*b) Priority for Services Categories\***

**An order of selection consists of priority \*for services\* categories to which eligible individuals are assigned based on the significance of their disability. Under an order of selection, individuals with the most significant disabilities [are selected first] \*have the highest priority\* for the provision of vocational rehabilitation services. \*Every individual within each specific priority for services category must be served before individuals in the next priority for services category can be provided with services. In the event there is insufficient funding to serve all individuals within the same priority for services category, the date of eligibility for vocational rehabilitation services shall be used as the criteria for offering services in chronological order to individuals within the applicable priority for services category as funding becomes available.**

**For eligible individuals who are not subject to the order of selection due to the need to receive specific services or equipment to maintain current employment, should that employment end, the eligible individual’s case record of services must be inactivated and the individual shall be subject to the order of selection criteria under a new application for vocational rehabilitation services.**

**Listed below, in the order of highest priority first, are the three categories of priority for services.\* [An “individual with significant disability” is defined as an individual with a disability –**

* **Who has a significant physical or mental impairment which seriously limits one or more functional capacities (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance, or work skills) in terms of an employment outcome;**
* **Whose vocational rehabilitation can be expected to require multiple vocational rehabilitation services over an extended period of time; and**
* **Who has one or more physical or mental disabilities resulting from amputation, arthritis, autism, blindness, burn injury, cancer, cerebral palsy, cystic fibrosis, deafness, head injury, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, mental illness, multiple sclerosis, muscular dystrophy, musculoskeletal disorders, neurological disorders (including stroke and epilepsy), spinal cord conditions (including paraplegia and quadriplegia), sickle cell anemia, intellectual disability, specific learning disability, end stage renal disease, or another disability or combination of disabilities determined on the basis of an assessment for determining eligibility and vocational rehabilitation needs to cause comparable substantial functional limitation.]**

**\*(1) Priority for Services Category 1: Individual with a most significant disability**

 **An individual with a most significant disability is defined as an individual—**

1. **Who has a significant physical or mental impairment which seriously limits four or more functional capacities (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance, or work skills) in terms of an employment outcome;**
2. **Whose vocational rehabilitation can be expected to require multiple vocational rehabilitation services over an extended period of time; and**
3. **Who has one or more physical or mental disabilities resulting from amputation, arthritis, autism, blindness, burn injury, cancer, cerebral palsy, cystic fibrosis, deafness, head injury, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, mental illness, multiple sclerosis, muscular dystrophy, musculoskeletal disorders, neurological disorders (including stroke and epilepsy), spinal cord conditions (including paraplegia and quadriplegia), sickle cell anemia, intellectual disability, specific learning disability, end stage renal disease, or another disability or combination of disabilities determined on the basis of an assessment for determining eligibility and vocational rehabilitation needs to cause comparable substantial functional limitation.**

 **(2) Priority for Services Category 2: Individual with a significant disability**

 **An individual with a significant disability is defined as an individual –**

1. **Who has a significant physical or mental impairment which seriously limits one or more functional capacities (such as mobility, communication, self-care, self-direction, interpersonal skills, work tolerance, or work skills) in terms of an employment outcome;**
2. **Whose vocational rehabilitation can be expected to require multiple vocational rehabilitation services over an extended period of time; and**
3. **Who has one or more physical or mental disabilities resulting from amputation, arthritis, autism, blindness, burn injury, cancer, cerebral palsy, cystic fibrosis, deafness, head injury, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, mental illness, multiple sclerosis, muscular dystrophy, musculoskeletal disorders, neurological disorders (including stroke and epilepsy), spinal cord conditions (including paraplegia and quadriplegia), sickle cell anemia, intellectual disability, specific learning disability, end stage renal disease, or another disability or combination of disabilities determined on the basis of an assessment for determining eligibility and vocational rehabilitation needs to cause comparable substantial functional limitation.**

 **(3) Priority for Services Category 3: Individual with a disability**

 **An individual with a disability is defined as an individual—**

1. **Who has a physical or mental impairment which for such individual constitutes or results in a substantial impediment to employment; and**
2. **Who can benefit in terms of an employment outcome from the provision of vocational rehabilitation services.**

**c) Functional Capacity Categories\***

**The degree of significance of disability is directly related to the number of functional \*capacity\* categories that are [impacted] \*seriously limited\* by the presence of a disability.**

**The functional \*capacity\* categories are:**

**[●] \*(1)\* Mobility – [Unable to effectively use conventional modes of transportation. Requires assistive devices. Due to disability, is unable to travel alone in unfamiliar places. Regularly requires one or more of the following to get around the community: modifications, adaptive technology, accommodations, assistance (personal or device). Range of travel is severely limited.] \*Physical and psychological ability to move about from place to place inside and outside the home compared to people with unaffected mobility. This includes travel to and from usual destinations in the community for activities of daily living, training, or work.**

**Serious limitations in this category include any of the following:**

**(A)The individual requires physical assistance from others to travel safely;**

**(B) The individual’s range of travel is severely limited;**

**(C) The individual requires modifications, mobility aids, adaptive technology, or other accommodations in order to travel independently.\***

**[Motor Skills - Unable to use upper extremity(ies) to obtain, control, and use objects. Unable to control and coordinate fine and/or gross motor movements. Unable to perform at a competitive work pace. Loss of use of dominant upper extremity.]**

**[●] \*(2)\* Self-Care – [Places self or others at risk due to deficits in decision-making, reasoning, or judgment. Is unable to perform normal activities of daily living -such as hygiene, cooking, shopping, and money management without assistance. Requires assistance on the job for personal needs. Requires extra attention or monitoring to prevent accident or injury. Unable to adjust to changes in daily routine or new situations.] \*Ability to manage self or living environment, as they affect an individual’s ability to participate in training or work related activities. This includes an individual’s management of any special health and safety needs which exist.**

**Serious limitations in this category include any of the following:**

**(A)The individual is dependent upon devices or the services of others to complete self-care activities;**

**(B) The individual requires assistance on the job or at training locations for personal care needs;**

**(C) The individual requires monitoring to ensure that self-care needs are met.\***

**[●] \*(3)\* Self-Direction – [Unable to work independently. Requires supervision on a frequent or ongoing basis to begin and carry through with goals and plans.] \*Ability to independently plan, initiate, problem solve, organize and carry out goal-directed activities related to self-care, socialization, recreation, and work.**

**Serious limitations in this category include any of the following:**

**(A)The individual requires intensive supervision and direction in order to begin or follow through on completing tasks;**

**(B) The individual requires monitoring to maintain appropriate behavior and to make safe and logical decisions;**

**(C) The individual exhibits substantial confusion and disorientation to their surroundings.\***

**[●] \*(4)\* Work Skills – [Unable to identify logical steps necessary to reach goals. Unable to remember and understand instructions. Unable to learn new tasks without intensive and/or specialized instructions. Unable to follow written/verbal instructions. Requires significant accommodations or rehabilitation technology to participate in training to develop work skills.] \*Ability to carry out specific tasks required for job functions and capacity to benefit from training in the necessary skills.\***

**Serious limitations in this category include any of the following:**

**(A)The individual is unable to independently identify logical steps necessary to complete multi-step work tasks;**

**(B) The individual requires ongoing training and monitoring to retain instructions for completing routine assignments;**

**(C) The individual’s productivity is below the competitive standards required for the work assignments.\***

**[●] \*(5)\* Interpersonal Skills – [Social withdrawal/isolation. Has significant difficulty interpreting and responding to behavior and communication of others. Work history includes recent negative references, firings, or multiple short-term jobs, or other evidence of work adjustment problems.] \*Ability to establish and maintain personal, family and community relationships and the actual/potential impact on job performance and security.**

**Serious limitations in this category include any of the following:**

**(A) The individual has difficulty establishing and maintaining relationships with others;**

**(B) The individual exhibits behaviors that are disruptive to others;**

**(C) The individual requires close supervision to maintain appropriate interactions with other individuals.\***

**[●] \*(6)\* Communication – [Unable to participate in conversation without accommodation or assistive technology. Expressive and receptive primary mode of communication is unintelligible to non-family members or general public. Unable to access printed/visual information without assistive technology and/or accommodation. Unable to understand telephone conversation even with amplification.] \*Ability to effectively exchange information via writing, speaking, listening, sign language or other adaptive methods. Limitations may occur because of physical, emotional or cognitive impairments.**

**Serious limitations in this category include any of the following:**

**(A) The individual is unable to communicate verbally or in writing with others;**

**(B) The individual is dependent upon alternative modes of communication or adaptive devices to be understood by others;**

**(C) The individual cannot independently express or exchange ideas or have a discussion that is coherent to others.**

**(7) Work Tolerance – Capacity to sustain physical, cognitive and/or psychological demands of a job.**

**Serious limitations in this category include any of the following:**

**(A) The individual is unable to perform work activity due to physical, psychological or cognitive limitations;**

**(B) The individual requires modifications to the work environment in order to have endurance to finish the scheduled work shift;**

**(C) The individual requires substantial restructuring of work tasks or assignments that would typically be expected of an incumbent in the job title to routinely perform.\***

**[In the event that the State Director determines that insufficient funds exist to serve all eligible individuals, in addition to all students with disabilities who are receiving Pre-Employment Transition Services prior to being determined eligible for vocational rehabilitation services, this information shall be communicated to the State Rehabilitation Council, the Commissioner of the Department of Rehabilitation Services and the Advisory Board, for their consideration and recommendations. A duly noticed public comment period and public hearing that allows for input on any proposed modification(s) to the applicable section of the Unified State Plan or Bureau policies to address the projected funding shortfall shall be provided. Should no alternatives be identified to ensure adequate funding to resolve the projected shortfall the decision shall be implemented to put an order of selection in place, serving first those individuals determined to have the most significant disabilities.**

**In order to determine the priority for services under an Order of Selection, the Vocational Rehabilitation Counselor will complete a Functional Assessment for Priority for Services Client Form during the eligibility for services process. The Priority Category under an Order of Selection will be determined based upon the results of the Functional Assessment for Priority for Services.**

**b) Priority for Service Categories**

**The Priority for Service Categories are as follows:**

**Category 1 - Defined as an individual with a most significant disability, resulting in serious limitations in terms of an employment outcome in at least [one of the areas outlined in] four [or more] of the identified functional categories. An individual in this category would require at least five vocational rehabilitation services over a period of eighteen months.**

**Category 2 - Eligible individuals with more significant disabilities that result in serious limitations in terms of an employment outcome in [at least one of the areas outlined in three of the identified functional categories. An individual in this category would require at least four vocational rehabilitation services over a period of one year.**

**Category 3 - Eligible individuals with significant disabilities that result in serious limitations in terms of an employment outcome in at least one of the areas outlined in two of the identified functional categories. An individual in this category would require at least three vocational rehabilitation services over a period of six months.**

**Category 4 - An eligible individual with a disability whose disability results in a limitation in terms of an employment outcome in at least one of the areas outlined in any one of the identified functional categories. An individual in this category would require at least one vocational rehabilitation service over a period of six months.]**

**[c)] \*d)\* Referral Services**

**(1) Individuals with disabilities, including eligible individuals who do not meet the Bureau's order of selection criteria for receiving vocational rehabilitation services if the Bureau is operating on an order of selection, will be provided accurate vocational rehabilitation information and guidance (which may include counseling and referral for job placement) using appropriate modes of communication to assist them in preparing for, securing, retaining, advancing in, or regaining employment; and**

**(2) The Bureau will refer individuals with disabilities to other appropriate Federal and State programs, including other components of the statewide workforce development system.**

**(3) The Bureau will refer to appropriate programs and service providers best suited to address the specific rehabilitation, independent living and employment needs of an individual with a disability who makes an informed choice not to pursue an employment outcome under the Bureau’s vocational rehabilitation program. Before making the referral, the Bureau will ----**

**(A) Explain to the individual that the purpose of the vocational rehabilitation program is to assist individuals to achieve an employment outcome by entering, advancing in, or retaining full-time or, if appropriate, part-time competitive integrated employment, (including customized employment, self-employment, telecommuting, or business ownership), or supported employment that is consistent with an individual's unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice;**

**(B) Provide the individual with information concerning the availability of employment options, and of vocational rehabilitation services, to assist the individual to achieve an appropriate employment outcome;**

**(C) Inform the individual that services under the vocational rehabilitation program can be provided to eligible individuals in an extended employment setting if necessary for purposes of training or otherwise preparing for employment in an integrated setting;**

**(D) Inform the individual that, if he or she initially chooses not to pursue an employment outcome, he or she can seek services from the Bureau at a later date if, at that time, he or she chooses to pursue an employment outcome; and**

**(E) Refer the individual, as appropriate, to the Social Security Administration in order to obtain information concerning the ability of individuals with disabilities to work while receiving benefits from the Social Security Administration.**

 **(4) In making the referrals, the Bureau will —**

**(A) Refer the individual to Federal or State programs, including programs carried out by other components of the statewide workforce development system, best suited to address the specific employment needs of an individual with a disability; and**

**(B) Provide the individual who is being referred—**

**(i) A notice of the referral by the Bureau to the agency carrying out the program;**

**(ii) Information identifying a specific point of contact within the agency to which the individual is being referred; and**

**(iii) Information and advice regarding the most suitable services to assist the individual to prepare for, secure, retain, or regain employment.**

**The Bureau will keep a record of those individuals who have received referral services as a result of not meeting order of selection criteria. A copy of all referral letters to other providers will be maintained in the individual’s record of services. All information contained in the letter of referral drafted by the Vocational Rehabilitation Counselor shall only be released to third party providers with the expressed written consent of the individual.**

**[d) Functional Assessment for Priority for Services Client Form (to be Completed at Eligibility Determination)**

**Client:**

**Date:**

**Completed by:**

**Background: When funding projections indicate that the Vocational Rehabilitation Program cannot provide services to all eligible individuals, Federal Law requires the Program to establish an order to be followed for selecting eligible individuals to whom vocational rehabilitation services shall be provided on the basis of serving first, individuals with the most significant disabilities.**

**Priority under an order of selection will be determined based upon the results of this Functional Assessment for Priority for Service Client Form. Individuals who have already begun receiving services under an Individualized Plan for Employment prior to the effective date of the Bureau’s order of selection, shall not be impacted by a decision of the Bureau to enter into an order of selection and shall continue to receive services as outlined in the Individualized Plan for Employment or subsequent amendments. Your Vocational Rehabilitation Counselor will complete this form and notify you of which Priority for Service category you have been assigned based upon the results of this document.**

**You will be provided with a copy of the completed document in your preferred communication mode.**

**You have the right to appeal the outcome of this assessment or to request a reassessment at any time, per Vocational Rehabilitation Policy.**

**The Priority for Service Categories are as follows:**

**Category 1 - Defined as an individual with a most significant disability, resulting in serious limitations in terms of an employment outcome in at least one of the areas outlined in four or more of the identified functional categories. An individual in this category would require at least five vocational rehabilitation services over a period of eighteen months.**

**Category 2 - Eligible individuals with more significant disabilities that result in serious limitations in terms of an employment outcome in at least one of the areas outlined in three of the identified functional categories. An individual in this category would require at least four vocational rehabilitation services over a period of one year.**

**Category 3 - Eligible individuals with significant disabilities that result in serious limitations in terms of an employment outcome in at least one of the areas outlined in two of the identified functional categories. An individual in this category would require at least three vocational rehabilitation services over a period of six months.**

**Category 4 - An eligible individual with a disability whose disability results in a limitation in terms of an employment outcome in at least one of the areas outlined in any one of the identified functional categories. An individual in this category would require at least one vocational rehabilitation service over a period of six months.**

**Functional Categories**

**Directions: Enter a “Y” for yes to items within each category where client self-reporting, Vocational Rehabilitation Counselor observation and documentation from applicable sources such as physicians, low vision practitioners, rehabilitation teachers, mobility instructors, etc. substantiate a significant functional limitation that verifies the inability of the individual to perform the particular task.**

**Mobility: This category considers ability to independently travel between locations. This category factors in physical limitations as well as cognitive limitations that may interfere with independent travel.**

**\_\_\_\_ Unable to use conventional modes of public transportation such as bus or ADA paratransit.**

**\_\_\_\_ Requires assistive devices such as a cane or dog guide to travel between two points in unfamiliar areas.**

**\_\_\_\_ Due to disability, is unable to travel alone in unfamiliar places.**

**\_\_\_\_ Even with the provision of a cane, dog guide or other adaptive mobility device, is disoriented in environments previously traveled.**

**\_\_\_\_ Range of travel is severely limited due to physical limitations resulting from secondary disabilities.**

**\_\_\_\_ Other adaptive mobility device is required for mobility (walker, wheelchair, scooter).**

**Motor Skills: Motor Skills represent the ability to move arms and coordinate movement to accomplish a task, such as picking up an object.**

**\_\_\_\_ Unable to use either upper extremity to grasp objects.**

**\_\_\_\_ Able to grasp objects with one upper extremity, but only after repeated attempts.**

**\_\_\_\_ Able to grasp objects with at least one upper extremity, but cannot place the object at a particular location.**

**\_\_\_\_ Unable to use upper extremity(ies).**

**\_\_\_\_ Has significant neuropathy in hands, lack of normal sensation.**

**Self-Care: This category considers ability to care for one’s self and to perform specific daily grooming and hygiene tasks.**

**\_\_\_\_ Unable to independently shower or take a bath.**

**\_\_\_\_ Unable to use a toilet independently.**

**\_\_\_\_ Unable to apply deodorant, brush teeth, clip nails independently.**

**\_\_\_\_ Unable to independently feed self, even if meals are prepared by others.**

**\_\_\_\_ Unable to prepare basic meals that require no cooking, such as preparing sandwiches or cereal.**

**\_\_\_\_ Unable to use a microwave oven to heat up prepared foods.**

**\_\_\_\_ Unable to safely use stove, oven or range top to prepare hot foods.**

**\_\_\_\_ Unable to use laundry machines to wash and dry clothing.**

**\_\_\_\_ Unable to select clothing appropriate for weather conditions.**

**\_\_\_\_ Unable to dress self independently.**

**\_\_\_\_ Requires monitoring to prevent accident or injury in home or daily environment.**

**\_\_\_\_ Requires monitoring to prevent accident or injury in unfamiliar settings.**

**Self-Direction: This category considers ability to make decisions in daily activities, at home, at work and in the community.**

**\_\_\_\_ Unable to adjust to minor changes in daily routine or new situations unless intensive instruction is provided and repeated.**

**\_\_\_\_ Due to limited reasoning skills, places self or others at safety or health risk.**

**\_\_\_\_ Requires a paid caregiver, volunteer or family member to oversee tasks and activities to ensure completion.**

**\_\_\_\_ Unable to perform multi step activities or tasks, even with direct supervision on a frequent or ongoing basis.**

**\_\_\_\_ Unable to perform single tasks, unless direct supervision is present to oversee all aspects of the single task.**

**\_\_\_\_ Unable to follow verbal instructions.**

**\_\_\_\_ Unable to follow written instructions.**

**\_\_\_\_ Unable to follow instructions given in electronic format.**

**\_\_\_\_ Unable to prioritize activities in order of sequence or importance, i.e., steps involved in arranging for a ride to get somewhere.**

**\_\_\_\_ Unable to make decisions independently.**

**\_\_\_\_ Unable to independently participate in job seeking activities.**

**\_\_\_\_ Unable to identify denominations of money consistently.**

**\_\_\_\_ Unable to use a checkbook or other bill paying option such as On-Line Checking.**

**Work Skills: This category considers ability to perform activities and tasks that result in wages or earnings.**

**\_\_\_\_ Unable to identify logical steps necessary to complete multi-step work tasks that involve three or more sequential activities.**

**\_\_\_\_ Unable to remember and understand verbal instructions necessary to complete simple, single step work tasks.**

**\_\_\_\_ Unable to remember and understand written instructions necessary to complete simple, single step work tasks.**

**\_\_\_\_ Unable to remember and understand verbal instructions necessary to complete multi-step work tasks.**

**\_\_\_\_ Unable to remember and understand written instructions necessary to complete multi-step work tasks.**

**\_\_\_\_ Unable to learn new tasks without intensive and/or specialized instructions, such as job coaching.**

**\_\_\_\_ Requires hand over hand instruction to complete basic work tasks.**

**\_\_\_\_ Requires significant, extensive accommodations or rehabilitation technology devices to complete 90 percent or more of work activities.**

**Interpersonal Skills: This category considers ability to interact with other individuals or groups of individuals.**

**\_\_\_\_ Individual has significant difficulty interpreting and responding to behavior and communication of others.**

**\_\_\_\_ Individual engages in offensive or inappropriate communication, such as verbal outbursts, unprovoked yelling, or harassing statements.**

**\_\_\_\_ Individual engages in offensive or inappropriate nonverbal behavior such as uninvited touching, prolonged staring or groping self or others.**

**\_\_\_\_ Work history includes recent negative references, firings, or multiple short-term jobs, or other evidence of work adjustment problems.**

**Communication: This category considers the ability to participate in conversations without accommodation or assistive technology.**

**\_\_\_\_ Speech cannot be understood by family members or close friends.**

**\_\_\_\_ Speech cannot be understood by passers by or those communicating with person for the first time.**

**\_\_\_\_ No audible speech exists.**

**\_\_\_\_ Only minimal speech such as single words or short phrases can be understood by family members or close friends.**

**\_\_\_\_ Only minimal speech such as single words or short phrases can be understood by passers by or those communicating with the person for the first time.**

**\_\_\_\_ Unable to communicate in written format, such as handwriting, Braille or electronic documents via email.**

**\_\_\_\_ Can only communicate in written formats such as handwriting, Braille or electronic documents via email in single sentences or phrases.**

**\_\_\_\_ If no intelligible speech exists, unable to utilize alternative communication such as sign language or communication board to converse with others.**

**\_\_\_\_ If no intelligible speech exists, can only communicate using sign language or communication board to converse with others.**

**\_\_\_\_ Unable to understand telephone conversation even with amplification.**

**\_\_\_\_ Unable to use a telephone to communicate emergency instructions.**

**\_\_\_\_ Unable to use a TTY machine to communicate emergency instructions.**

**Functional Assessment for Priority for Services Client Form - Worksheet**

**Category Limitations Identified Total Questions**

**Mobility \_\_\_\_\_\_\_ out of 6**

**Motor Skills \_\_\_\_\_\_\_ out of 5**

**Self-care \_\_\_\_\_\_\_ out of 12**

**Self-direction \_\_\_\_\_\_\_ out of 13**

**Work Skills \_\_\_\_\_\_\_ out of 8**

**Interpersonal \_\_\_\_\_\_\_ out of 4**

**Communication \_\_\_\_\_\_\_ out of 12**

**Priority for Service Category: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]**