

TRANSITION PLANNING SUMMARY

Student/Client Name	School District	Date

I, _____, understand I have been
 (Student/Client Name)
 determined eligible for Vocational Rehabilitation (VR) services, but no Individualized
 Plan for Employment (IPE) has been developed because: (Check all that apply)

- Student eligible, but on the waiting list
- Still in planning phase
- A mutually agreed upon vocational goal has not been identified
- Late Referral
- Other (Please specify): _____

Student/Client

- I understand an IPE will be developed when the above-checked item(s) have been resolved
- I agree to work with my VR counselor to develop the IPE prior to graduation or exit from school

VR Counselor

- Measurement of the progress toward the development of the IPE has been mutually agreed upon
- Parent/Guardian has been notified of action on case
- Signed copy of IPE has been provided to the school district
- Other (Please specify): _____

Signature of Student/Guardian **Date**

Signature of VR Counselor **Date**

cc: School District