**VR Monthly Progress Report**

**This is a monthly status report form to document the client’s monthly participation with VR services**.

Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Client ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

KEES Case #:\_\_\_\_\_\_\_\_\_\_\_\_

ES Career Navigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| ***To be completed by Employment Services*** | ***To be Completed by VR*** |
| Please indicate if information is required for the following activities by checking the box. Please indicate the type of Activity that is listed on the IPE. i.e. Class at WSU, Parenting Class, CNA training, etc,  | Please indicate the client’s participation by selecting the appropriate box for the activities that are checked. |
| Check if Required | Activity | Meeting Expectations | Not Meeting Expectations | Case Closed |
|  | Job Search/Job Readiness |  |  |  |
|  | Vocational Education *Type:* |  |  |  |
|  | Education Directly Related to Employment *Type:* |  |  |  |
|  | Satisfactory Attendance at Secondary School or in a GED Program |  |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of VR Counselor Date