**Job Development and Placement Activities Log**

Consumer: Vendor:

LRS Counselor: Case Number:

* + 1. DATES AND NAMES OF EMPLOYER CONTACTS:
	1. Date: Employer:

	Results:
	2. Date: Employer:

	Results:
	3. Date: Employer:

	Results:
	4. Date: Employer:

	Results:
1. LIST THE NAMES AND DATES OF ANY OTHER INDIVIDUALS CONTACTED AND THE RESULTS OF THOSE CONTACTS:
	1. Date: Employer:

	Results:
	2. Date: Employer:

	Results:
	3. Date: Employer:

	Results:
	4. Date: Employer:

	Results:
2. NAMES AND DATES OF CONSUMER CONTACTS AND RESULTS:
	1. Date: Employer:

	Results:
	2. Date: Employer:

	Results:
	3. Date: Employer:

	Results:
	4. Date: Employer:

	Results:
3. SUMMARY OF RESULTS AND ADDITIONAL COMMENTS OR CONTACTS:

Vendor Signature:

Date: