

## JOB PLACEMENT FEEDBACK REPORT

Counselor: \_\_\_\_\_ Consumer: \_\_\_\_\_

Vendor: \_\_\_\_\_ Month of: \_\_\_\_\_

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### I. Monthly Progress

Works well to obtain employment: Yes \_\_\_\_\_ No \_\_\_\_\_

Has the following work related needs / barriers:

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

### II. Employment Information

Employed with \_\_\_\_\_

Job Title \_\_\_\_\_

Rate of pay \_\_\_\_\_ per \_\_\_\_\_ and working \_\_\_\_\_ hours per week

The hire date for employment is / was \_\_\_\_\_

Follow-up contact was made on \_\_\_\_\_ concerning job retention

\_\_\_\_\_ satisfactory performance

\_\_\_\_\_ unsatisfactory performance

\_\_\_\_\_ Counselor, consumer and vendor need to meet

### III. Successful Completion of Competitive Employment Outcome

\_\_\_\_\_ Placement

\_\_\_\_\_ Job retention for 90-days with follow-up

### IV. Unsuccessful Employment Outcome

\_\_\_\_\_ Failure to corporate

\_\_\_\_\_ Failure to maintain or loss of contact

Other \_\_\_\_\_

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Comments:

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

Vendor Staff: \_\_\_\_\_ Date: \_\_\_\_\_

Consumer: \_\_\_\_\_ Date: \_\_\_\_\_