

Report Completion Guide - SE Career Profile Report

This guide provides additional detail for completing the [SE Career Profile Report \(DVR-18033-E\)](#). It explains what information DVR is looking for in certain prompts and provides examples where helpful. These examples are provided for illustration only. Providers should document findings based on multiple information sources and real interactions with the consumer.

This information is collected under the authority granted by 34 CFR § 361.38 for the purpose of facilitating vocational rehabilitation (VR) services. As mandated by this regulation and Wis. Stat. § 47.02(7), all personal information is kept confidential and released only with the informed consent of the consumer or their representative, or as required by law. Completing this form is required for payment, and failure to submit reports will result in nonpayment. Information collected may be used for administration of the VR program, coordination of services, and other purposes.

Report must be submitted **within five (5) days** of the end of service, or, if the service is continuing, at the end of each month in which the service is provided.

Report Month	Report Year (YYYY)
Consumer IRIS Number (9 Digits)	Service Provider Name (10-Character Abbreviation)
Consumer Name (As Listed on Purchase Order)	Service Authorization Date (MM/DD/YYYY)
Purchase Order (PO Number)	Report Author

Instructions

This form is to be completed by the Employment Specialist during the first few weeks of meeting with a consumer. All sections should be completed first with information from the consumer when meeting in the community, and then by individual interviews with the Supported Employment (SE) team.

All members of the SE team should be contacted and interviewed. Other sources of information should include existing client records (review and summarize), observation of interactions with the consumer in the community or other approved means, and, with permission, family members, teachers, and previous employers or co-workers. The Service Provider should observe the consumer in the community to the extent possible.

Potential Members of the Supported Employment Team

Supported Employment services are provided as a working team with the DVR consumer at the center. The makeup of the team is individualized based on the needs and expressed wishes of the consumer. The team typically includes the consumer, DVR case facilitator, Supported Employment Service Provider, guardian (if applicable), representative payee, representatives of the entities providing funding and service coordination following DVR case closure (long-term care agencies), family members, and any other individuals identified by the consumer who support their employment goals.

If the Service Provider is finding it difficult to identify team members, they should contact DVR.

<p>Consumer Name: Phone: Email:</p>	<p>Guardian Name: Phone: Email:</p>
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DVR Case Facilitator Name: Phone: Email:	Service Provider Name: Phone: Email:
Long-Term Support Agency Representative Name: Phone: Email:	Other Team Member Name: Phone: Email: Relationship to the consumer:
Other Team Member Name: Phone: Email: Relationship to the consumer:	Other Team Member Name: Phone: Email: Relationship to the consumer:

Consumer & Supported Employment Team Interactions

Purpose of this section: Document how information was gathered through real interactions.

Include for each entry to the grid:

- Date and location
- Participants
- Type of interaction

Interaction details:

- Purpose/Expected Learning – What were you trying to learn?
- Observations/Results – What did you observe about skills, interests, and behaviors?
- Team Input – What insights did others provide?
- Next Steps – What should happen next based on this interaction?

Tips: Focus on what was learned, not just what occurred.

Record interactions with the consumer and SE team members to gather information about vocational strengths, preferences, and work exploration. This includes community visits, home/provider site meetings, or other interactions relevant to understanding the consumer's employment goals and support needs, in order to complete the Career Profile assessment.

Types of Interaction

- **Observation / Exploration** – Observing the consumer in a natural setting to gather information about interest, preferences, capabilities, skills, barriers, and strengths.
- **Discussion / Interview** – Meeting with the consumer, SE team, or others to discuss goals, interests, barriers, or supports needed.
- **Employer / Community Exploration** – Visiting or learning about a workplace, job role, or industry. Intended to be informational and exploratory; consumers are not expected to complete work or perform tasks beyond observation and discussion. Examples include:
 - **Interview:** A prearranged conversation to learn about the job, workplace, and expectations. Providers should discuss ahead of time what the consumer wants to learn.
 - **Informational Interview:** Meeting or discussion with an employee, supervisor, or employer to understand the role, work environment, and daily tasks. This can be prearranged or happen as part of a workplace visit or tour. Plan discussion with the consumer beforehand about what information they want.
 - **Workplace Tour:** Structured visit to observe the workplace, including work environment, staff roles, and overall conditions. Helps the consumer explore possible jobs.
 - **Workplace Visit (informal):** Unstructured visit or observation of a workplace to learn about different roles, staff, and work conditions. Can include observing operations or casual conversations.

- **Other** – Any other planned interaction with a community site or workplace for learning purposes. Document details below.

Dates of Interaction	Location (e.g., consumer home, provider office, business name)	Participants (Consumer, SE team members, others)	Type of Interaction (Observation, Informational Interview, Application, Business tour, Workplace Visit, Other)

Purpose / Expected Learning: What specific information or skills were you trying to learn or assess during this interaction/visit?

Preparation: How did the consumer prepare for the interaction/visit? Were there any materials, discussions, or strategies used in advance?

Observations / Results: What was observed about the consumer's skills, interests, behaviors, or responses? How did the interaction/visit go?

Supported Employment Team Input: What do the team members say about the consumer's vocational strengths and challenges?

Next Steps / Follow-Up: Based on this interaction/visit, what actions or plans are recommended next (additional visits, skill-building activities, job exploration, etc.)?

Consumer Questions

Work Goal

Have you identified a job goal with your DVR case facilitator? What was that goal? (Identify if the provider discovers that the goal is different from what was discussed with DVR.) If No, what job or types of jobs are you interested in?

Discussion about the job goal should include:

- Do you like (or think you will like) that kind of work?
- Job you would not want.
- People you know who are working and the types of jobs.
- Concerns or worries about going to work.
- Motivation for working.
- Past successful jobs or environments.

Purpose: Understand the consumer's interests, motivations, and employment direction.

Include:

- Stated job goals (and differences from goal information received by DVR if applicable)
- Preferences and dislikes
- Motivations for working
- Concerns or barriers
- Past successful environments

Tips: Look for patterns across responses rather than isolated answers.

Possible discussion prompts: Do you know people who are working? What types of jobs? What do you think about those jobs? Is there anything that worries you about going to work? Why do you want to work? In what jobs or environments have you been successful with work?

Education/Training Experience

Did you complete high school?

Yes No

If No, would you be interested in earning your GED/high school equivalency diploma or other training?

Yes No Not Applicable

Participation in any work-related experiences high school (job shadows, work tours, coursework, careers or job readiness class, workplace assessments, volunteer activities, DVR-provided student work-based learning services, resume/portfolio development):

Yes No

If Yes, describe experiences and lessons learned: (What activities took place and was that like? What did the consumer identify that they learned from those experiences to help them now?)

Include in this section:

- High school completion status
- Interest in further education
- Work-related experiences (school or community)

Tips: Focus on what the consumer learned and how it applies to employment.

Job and Work Experience

Most Recent Job		
Job Title	Employer	
Job Duties		
Start Date	End Date	Hours per Week
Additional Details: Discuss how the job was found, likes/dislikes, supervisor and co-workers, reason for leaving, and other information to share.		
<p>Purpose of this section: Understand past work experiences and transferable skills.</p> <p>Include:</p> <ul style="list-style-type: none"> • Job details • Duties performed • Likes/dislikes • Reason for leaving <p>Tips: Identify patterns across jobs (e.g., environments where the consumer succeeded or struggled).</p> <p>Possible discussion prompts: How did you find this job? What did you like about this job? What did you dislike about this job? What was your supervisor like? What were your co-workers like? What was the reason for leaving this job? Is there any other information you would like to share about this job?</p>		

Next Most Recent Job		
Job Title	Employer	
Job Duties		
Start Date	End Date	Hours per Week

Next Most Recent Job
Additional Details: Discuss how the job was found, likes/dislikes, supervisor and co-workers, reason for leaving, and other information to share.

Next Most Recent Job		
Job Title	Employer	
Job Duties		
Start Date	End Date	Hours per Week
Additional Details: Discuss how the job was found, likes/dislikes, supervisor and co-workers, reason for leaving, and other information to share.		

Criminal Justice History

Please describe any criminal justice involvement and relevant work implications. Include contact information for any individuals who need to be consulted or included in planning for employment (e.g., probation or parole).

Do you have any pending legal charges?

Yes No

If Yes, what charges?

Physical Health

Purpose of this section: This section helps determine how the consumer's physical abilities and health considerations may impact job match, job tasks, scheduling, and support needs. The goal is not to document medical history, but to understand functional impact on employment. This section should clearly answer: What can the consumer physically do? What are the limits? What should be considered when identifying jobs? Information here should directly connect to: job match considerations, support needs, and recommendations later in the report.

How is your physical health? Do you have any health problems to consider in employment?

Include:

- Any health considerations that may affect work
- How those health concerns show up in real-life functioning
- Whether any health conditions are stable, variable, or unpredictable

Strong responses should also include:

- Impact on work (e.g., fatigue, mobility, stamina, pain, need for breaks)
- Any known limitations or considerations

Tips: Avoid listing diagnoses with no explanation, or simply stating "good health" without context if there are known limitations.

Are there any daily living or other support needs that may require another individual to assist? (e.g., going to the bathroom, assistance to eat/drink during breaks and lunch, taking medications, etc.)?

Include:

- Whether the consumer requires assistance with basic needs during the workday
- The level of independence vs. reliance on others

Strong responses should also include:

- Type of support needed (if any)
- When support is needed (e.g., breaks, meals, medication)
- Who typically provides that support

Ability	Value	Notes / Relevant Work Details
The consumer can stand for	hours or minutes.	<p>Functional Ability table: For each category, provide a realistic estimate based on observation and/or discussion. Add notes explaining context or variability.</p> <p>Include:</p> <ul style="list-style-type: none"> • Realistic estimates of what the consumer can physically sustain • Information that directly informs job matching <p>Tips: Avoid leaving fields blank or providing unrealistic estimates.</p> <p>Examples:</p> <ul style="list-style-type: none"> • Can stand 2-3 hours with breaks; longer periods increase discomfort. • Can lift up to 25 pounds occasionally; frequent lifting should be under 15 pounds.
The consumer can lift	pounds.	
The consumer can walk	miles or blocks.	
The consumer can work	hours per day.	
The consumer can work	days per week.	

Consideration	Yes	No	Notes / Relevant Work Details
The consumer can climb stairs.	<input type="checkbox"/>	<input type="checkbox"/>	<p>Considerations table: Include a clear explanation in the notes column when "yes" is selected.</p> <p>Include:</p> <ul style="list-style-type: none"> • Specific functional limitations that could impact job tasks or environments. <p>Examples:</p> <ul style="list-style-type: none"> • Balance: "Yes – unsteady on uneven surfaces; avoid outdoor or construction settings." • Fine motor: "Yes – difficulty with small objects; may impact assembly or cashier work."
The consumer has issues with balance.	<input type="checkbox"/>	<input type="checkbox"/>	
The consumer has issues with fine motor skills.	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	

Life Activities and Experiences

Purpose of this section: This section helps identify patterns in the consumer's daily life that translate into work strengths, preferences, and potential job matches. Think of this as answering: "How does this person naturally spend their time, and what does that tell us about work fit?"

Information in this section is used to identify any other interests, networking, volunteer, or work experience, or strength areas not identified in other sections.

Friends and social groups:

Include:

- Types of social interactions (small group, large group, one-on-one)
- Frequency of interaction
- Comfort level in social settings

Purpose: Helps assess interpersonal comfort, teamwork potential, and social stamina.

Example: Consumer prefers small group interactions and regularly meets with two close friends. Reports discomfort in large or unfamiliar group settings.

Personal activities, including hobbies, performed at home and in the community:

Include:

- Specific activities (not just general categories)
- Level of independence
- Frequency and consistency

Purpose: Identifies interests, routines, and transferable skills.

Example: Enjoys cooking simple meals independently and follows online recipes. Demonstrates ability to follow multi-step directions.

Family / friend activities, including hobbies, performed at home and in the community:

Include:

- Activities done with others
- Roles the consumer takes on (leader, participant, observer)

Purpose: Gives insight into team roles, communication style, and support systems

Specific events and/or activities that are of critical importance to you:

Include:

- Regular commitments (religious events, caregiving, appointments, etc.)
- Non-negotiable priorities

Purpose: Impacts scheduling, availability, and job match

What are your typical sleep hours? What is the best time of day for you to work?

Include:

- Typical sleep schedule
- Peak functioning times

Purpose: Critical for shift matching and job success

Description of Skills, Interests, and Conditions in Life Activities

Type of Skill	Name of Skills / Description
Domestic/Home	<p>Purpose of this section: Translates life activities into usable employment insights. The goal is not just to list activities, but to identify skills, interests, and conditions for success.</p> <p>For each area, include:</p> <ol style="list-style-type: none"> 1. Skill – What can the consumer do? 2. Interest – Do they enjoy it, tolerate it, or avoid it? 3. Conditions – Under what circumstances are they successful? <p>Example:</p> <ul style="list-style-type: none"> • Domestic/Home – Prepares simple meals independently and follow routines well. Prefers structured tasks with clear steps. Demonstrates consistency when tasks are familiar. <p>Tips: Avoid just listing examples (e.g., "likes cooking"), not explaining level of independence, or not connecting to work relevance.</p> <p>If you're unsure what to write, ask: "What does this tell me about the type of job this person could succeed in?"</p>
Community Participation/Volunteering	
Recreation/Leisure	
Academic	
Physical Fitness	
Arts and Talents	
Communication	
Mobility/Travel	

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Transportation Plan

Purpose of this section: This section determines whether the consumer has reliable and realistic access to work. Transportation is often a primary factor in job success or failure, so this section should be practical and specific.

Overall guidance:

- Complete as much of the table as possible
- Be realistic – not optimistic
- Identify both primary transportation and backup options when possible

Consider:

- Reliability (Will the consumer consistently get to work?)
- Flexibility (Can the plan adapt to schedule changes?)
- Independence level
- Long-term sustainability

Plan for transportation (resources, cost, roles, and responsibilities). Complete as much of the table as possible. If the area does not apply, enter N/A.

Describe the plan:

	Geographic Area it is Available/ Practical	Times it is Available (Days and Hours)	Flexible	Reliable	Cost per Ride	Training or Support Needed & Provider	Long-Term Option
Walking			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Biking			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Public Transit			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Rides from Family			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ride share (Community Member/ Coworker)			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Taxi / Transportation Company			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Driver's License			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Specialized Transportation			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other:			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Provider Summary

Purpose of this section: Integrate all findings into recommendations. This section should clearly answer "Based on everything learned, what should happen next – and why?" This is where all prior sections come together into clear, actionable recommendations.

Tips: Recommendations should clearly reflect patterns identified throughout the report.

Service Recommendations

Provide a summary of any additional service needs for the consumer.

Is the consumer recommended for Supported Employment services? Based on the Career Profile assessment, explain why or why not.

Include:

- A yes or no response with explanation
- Evidence from the report

Example: Supported Employment services are recommended due to the need for ongoing job coaching, support with task sequencing, and limited independence in new environments.

Do you think the consumer may need assistive technology or other work accommodations? If yes, describe what is recommended and why.

Include:

- Specific accommodations or AT supports (not general statements) if known
- Why they are needed

Example: Visual task checklist recommended to support memory and task sequencing based on observed need for prompts.

Are there any additional services that would support the consumer's employment goals? Examples may include: Work Incentive Benefits Services, skill building, transportation training, Internship/Temporary Work, Job Shadows, or other services (please describe).

Include:

- Practical, relevant supports
- Not vague or hypothetical

Some examples are listed above in prompt.

Behavioral Support Plan: Does the consumer have a behavioral support plan or other formal written plan guiding in-home or community activities?

Yes No

If Yes, please describe the contents and identify the source or location:

Work and Support Recommendations

Provide a summary of findings identified during the Career Profile assessment.

Job Search

Which components of a job search has the consumer done in the past or is comfortable doing? (e.g., completing applications, communicating with employers, interviewing)

Include:

- What the consumer can do independently
- What requires support

Consider: application ability, interview ability, employer communication skills.

After discussing the components of a job search, which components does the consumer want to try first, with assistance as needed?

Job Match Considerations

Physical / health considerations and proposed solutions:

Include:

- Physical limits affecting job type or environment
 - o Standing, lifting, stamina limits
 - o Environmental considerations

Example: Needs ability to alternate sitting/standing due to fatigue; avoid jobs requiring prolonged physical exertion

Mental health considerations or strategies (e.g., interpersonal skills, coping skills, staff support):

Include:

- Work behaviors and coping strategies
- Interpersonal functioning
- Stress tolerance
- Communication style
- Support needs in workplace interactions

Example: Benefits from predictable routines and clear expectations; may need support with managing unexpected changes.

Habits, routines, or mannerisms that should be considered in job placements:

Include:

- Work-relevant behaviors affecting fit or performance
 - o Attendance patterns
 - o Pacing style
 - o Routine dependence

Example: Performs best with consistent daily structure and may struggle with frequent schedule changes.

Does the consumer have a payee, or do they understand how benefits may be affected by earned income?

Include:

- Whether consumer has rep payee
- Understanding or awareness of earnings impact on benefits

Support Needs

Promising solutions or strategies (current, past, or potential):

Include:

- Practical supports needed for job success
 - o Job coaching needs
 - o Accommodations
 - o Environmental supports

Example: Requires visual task supports and occasional prompting for task sequencing in new environments.

Jobs or work environments that the consumer and/or team recommend avoiding (e.g., allergens, animals, environmental triggers):

Include:

- Clear mismatch factors
- Physical, sensory, or behavioral triggers
- Work environments that are not appropriate

Example: Avoid high-noise environments due to sensory sensitivity.

Skills or Barriers

Skills or barriers that may need to be matched to specific employment sites (e.g., outdoor work, person-to-person interaction):

Include:

- Strengths that support employment (transferable skills)
- Barriers that require matching or support

Skills or barriers that may require negotiation with employers (e.g., break times, accommodations):

Any potential business matches identified for outreach (including contact details):

Include:

- Specific, realistic job leads or industries
- Based on actual assessment findings
- Target industries or employers if known
- Rationale for match

Supported Employment Coordination Plan Section (if applicable)

To be completed for only those consumers receiving Customized Employment, Individual Placement and Support (IPS), or Supported Employment.

Note: When working with Family Care, IRIS, CLTS, or other long-term support programs, DVR must coordinate with the program to identify the type of supports needed and when those services should be implemented and identified in corresponding consumer service plans. The communication should be documented and include an agreement for planned services, employment, payment, timing, and outcomes for the consumer.

The coordinated plans should be reviewed at the following three points in the process:

1. DVR Post Career Profile/Discovery meeting
2. DVR 60-day on-the-job meeting
3. Before transition to long-term support

DVR Post-Career Profile Report Coordination

Signatures are optional. If signatures are not obtained, Service Providers must document the plan discussion and agreement in the section below the signature lines. DVR staff must also document the meeting and agreement in a case note.

Consumer Signature	Date Signed
Guardian Signature (if applicable)	Date Signed
DVR Signature	Date Signed
Long-Term Support Provider Signature	Date Signed

Service Provider Signature	Date Signed
Other Signature	Date Signed

If signatures were not obtained, complete the following:

Date of plan review meeting:
Meeting format: <input type="checkbox"/> In-person <input type="checkbox"/> Phone <input type="checkbox"/> Virtual <input type="checkbox"/> Other If Other, explain:
Meeting participants:
Agreement confirmed by all parties: <input type="checkbox"/> Yes <input type="checkbox"/> No If No, explain:
Date of next scheduled review meeting:

Please add any additional information after this line.

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