



TENNESSEE DEPARTMENT OF HUMAN SERVICES - VOCATIONAL REHABILITATION SERVICES

Vocational Adjustment Progress Report

Customer Name:

Counselor:

Month:

CRP:

N = Goal not Met Removed from Plan

M= Met Goal for Month

MO = Overall Goal Met - Behavior

Table with 5 columns: AREAS, N, M, MO, COMMENTS. Rows include: 1. Attendance/Punctuality, 2. Hygiene/Appearance, 3. Staying on task, 4. Follows instructions, 5. Works Independently, 6. Cooperation with Supervisor, Co-Workers, Team.

DHS staff should check the "Forms" section of the intranet to ensure the use of current versions. Forms may not be altered without prior approval.

Distribution: Vendor (original) VR Counselor (copy)

HS-3350 (Rev. 01-2023)

7. Safety Practices: To learn and consistently practice standard work area rules and policies.				
8. Work Tolerance: To build physical and mental tolerance needed for maximum work potential.				
9. Work Speed & Quality: To increase/maintain work speed to _____ % or to maximum potential with consistent acceptable quality and neatness.				
10. Work Related Judgment/Response to Corrections: Consistently demonstrates job flexibility, appropriate interaction with others, acceptance of work rules and policies, good attitude and initiative toward work. Consistently asks appropriate questions or further clarification of instructions when needed.				
11. Work Related Skills, Independent Living Skills, Academic, Job Readiness: Classes attended during the month:				
12. Other Barriers to Employment.				

of hours of services previously completed: _____

("Total" from previous month's report)

of hours of services completed this month: _____

Total # of hours of services completed: _____

Comments:

Date the report content was reviewed with the customer or their representative/guardian:

CRP Staff

Date