



## Participant Profile Sheet

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

DOB \_\_\_\_\_

Participant VR # \_\_\_\_\_

Participant SSN \_\_\_\_\_

Disabilities \_\_\_\_\_

Sources of Support (i.e. SSI/SSDI, family, Medicaid, etc.) \_\_\_\_\_

VR Counselor/Case Manager \_\_\_\_\_

VRC/CM Email \_\_\_\_\_

Employment Consultant \_\_\_\_\_

Employment Consultant Email \_\_\_\_\_

## Background Information

Work History \_\_\_\_\_

Education Level \_\_\_\_\_

Potential Transferable Skills \_\_\_\_\_

## Interests and Preferences

Skills/Experience \_\_\_\_\_

Preference of Geographic Work Area \_\_\_\_\_

Part Time/Full Time \_\_\_\_\_

Hours per Day \_\_\_\_\_

Hours per Week \_\_\_\_\_

Days Available \_\_\_\_\_

Shifts Available \_\_\_\_\_

Transportation \_\_\_\_\_

### Physical Work Environment

Are the following factors of a work environment important to you?

The size of the area \_\_\_\_\_

Temperature of your work area (indoors, outdoors, hot, dry)? \_\_\_\_\_

Lighting in your work area? \_\_\_\_\_

Noise level of your work area? \_\_\_\_\_

The physical layout of your work area (cluttered, stairs, etc.)? \_\_\_\_\_

Co-Workers/Supervision \_\_\_\_\_

Does it matter to you the number of co-workers with you or near you? \_\_\_\_\_

Does it matter the number of supervisors directing you? \_\_\_\_\_

Do you work best with co-workers your own age or older? \_\_\_\_\_

I learn new jobs best when:

Someone shows me first

Someone tells me how it needs to be done

I do it alone

Other \_\_\_\_\_