

My Annual Declaration of My Employment Goals for My ISP Year

Your Name: John Cunningham	Date of Birth: 5-10-1986	Phone #/Email Address: 503-123-4567; jcunningham@yahoo.com	Today's Date: 6-9-14
Name of Services Coordinator (SC) or Personal Agent (PA): Jane Smith	SC/PA Phone # and Email Address: 503-423-4567; Jane.Smith@yahoo.com	Name of Brokerage or CDDP: Multnomah County	

1A. Select the Funding Source for Your Current ODDS services (Check All That Apply): Comprehensive Waiver K-Plan
 Support Services Waiver I receive state-funded services only (see directions if this is selected) Other(specify):

1B. If you do not currently receive services through an ODDS waiver, are you eligible to receive services through the Comprehensive or Support Services Waiver? Yes No (see directions if "no" is selected)

2A. Your Current Employment Status: Check the ODDS-funded employment service (s) that you have participated in during the last 90 days: Individual Employment Small Group Employment Employment Path Community Employment Path Facility Discovery/Career Exploration None of the Above

2B. I am employed but do not use the applicable ODDS employment service. The applicable ODDS employment service would be: Individual Employment Small Group Employment

2C. For each service selected in 2A, provide the following information:

Service	Provider Name& City	Contact Person's Name, Phone # & Email Address	Are You Still Receiving this Service
Discovery/Career Exploration			<input type="checkbox"/> Yes <input type="checkbox"/> No

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Job Coaching			<input type="checkbox"/> Yes <input type="checkbox"/> No
Small Group Employment	Sertoma, Portland, Oregon	Gene Harris, GeneH@sertomaportland.org , 503-345-6789	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Employment Path Community	Sertoma, Portland, Oregon	Anna Gonzalez, AnnG@sertomaportland.org 503-987-6543	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Employment Path Facility			<input type="checkbox"/> Yes <input type="checkbox"/> No

2D. Your Current K-Plan Services: Check the box or boxes of the following K-Plan services that you have participated in during the last 90 days: Day Support Activities Community Day Support Activities Facility Neither

2E. For each service selected in 2D, provide the following information:

Service	Provider Name & City	Contact Person's Name, Phone # & Email Address	Are You Still Receiving this Service?
Day Support Activities Community			<input type="checkbox"/> Yes <input type="checkbox"/> No
Day Support Activities Facility			<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Your employment goals for your upcoming ISP year:

3A. Students (age 18-20) *If you are under the age of 22 and are still attending school include yourself under this category only.*

Attending school and do not want to work now. Expected date of exit from school: _____ Date by which a Career Development Plan and Vocational Assessment (CDP) will be completed: _____

Attending school and I do want to work now. Complete a CDP.

3B. Working age adults (age 21-60) *must choose one of the following statements: Please read instructions for guidance on making the proper selection. If you are at least 18 years old and have exited school include yourself under this category only.*

Employed in an integrated employment setting and I want to: (Check all that apply. Except for Retire, complete a CDP)

Retain current job

Advance in current job (more hours, raise, new skills, promotion, etc.)

Get a new job

Get an additional job

Retire – I am 60 or will be 60 this ISP year.

Currently unemployed and wants integrated employment. Complete a CDP.

Currently unemployed and interested in integrated employment. Complete a CDP.

Not interested in integrated employment now but may be interested in the future. Complete a CDP.

Currently unemployed and wants to retire. I am 60 or will be 60 this ISP year. Do not complete a CDP.

Not interested in integrated employment now and not interested in integrated employment in the future. Do not complete a CDP. Instead, complete My Decision Not to Explore, Pursue, Obtain or Maintain Community Employment For My Upcoming ISP Year and in the Future and Vocational Assessment (MDE).

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4: People who helped me to create "My Declaration":

Printed Name	Signature	Role in My Life	Employer (Only needed if the person is paid to provide ODDS or VR services to you)	Phone # & Email Address
John Cunningham	(Each person signs their name in this column)	self		503-123-4567 jcunningham@yahoo.com
Bob and Marge Cunningham		Parents		503-446-9876 J&mcunnigham@yahoo.com
Theresa Johnson		Sister		503-987-0965 tjohnson@yahoo.com
Gene Harris		Job Coach mobile crew	Sertoma	503-345-6789 GeneH@sertomaportland.org ,
Anna Gonzalez		Supports me in Employment Path Community	Sertoma	503-987-6543 AnnG@sertomaportland.org
Jane Smith		Services Coordinator	Multnomah County CDDP	503-423-4567 Jane.Smith@yahoo.com

X

Person

(John would sign.)

My Career Development Plan and Vocational Assessment

My Name: John Cunningham	Date of Birth: 5 -10 - 1986	Today's Date: 6 - 9 - 14	SC/PA Phone # & Email: 503-123-4567; Jane.Smith@yahoo.com
Name of My Service Coordinator (SC) or Personal Agent (PA): Jane Smith	Name of Brokerage or CDDP: Multnomah County		

Section 1. Selecting ODDS Employment Services:

To reach the goals I identified on "My Declaration" my SC or PA will help me to:

Select a provider of Discovery/Career Exploration Services (D/CES) and request the service by 7 - 30 - 14
After the Discovery Profile is created, my SC/PA will collaborate with my provider of this service to refer me to VR.*

When you select a provider of D/CES, list the following information for the person who will be providing this service:		
Name of Organization: To be determined	Name & Title of Contact Person:	Phone # & Email Address:
After you select a VR provider, list the following information for the person who will be providing the VR service:		
Name of Organization: To be determined	Name & Title of Contact Person:	Phone # & Email Address:

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Select a provider of Employment Path Services and request the service from ODDS by 7 - 30 -14. See directions for the requirements for selecting this service. I am requesting: **Community** **Facility (you may request both.)**

Employment Path Community: I anticipate that I will participate in this service from 8 - 2014 – 8- 2015.

List the information for the person who completed the “provider” sections for this service:		
Name of Organization: Sertoma	Name & Title of Contact Person: Anna Gonzalez, Employment Services Coordinator	Phone # & Email Address: 503-987-6543; AnnG@sertomaportland.org

Employment Path Facility: I anticipate that I will participate in this time-limited service from - - - .

List the information for the person who completed the “provider” sections for this service:		
Name of Organization:	Name & Title of Contact Person:	Phone # & Email Address:

Select your goals for Employment Path: These four goals can occur in Employment Path Community or Facility or both.

To develop my skills to communicate effectively with supervisors, co-workers, customers: **Community** **Facility**

You and your SC or PA:	You and your Provider:
As a result of this service, I will:	To achieve my goal, we will:
Become more comfortable and confident in talking with people I either do not	1) I will take the lead in communicating with others during our time in the community. For example, asking people for directions when we need to

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<p>know or am only briefly acquainted with.</p>	<p>find a place, asking sales people direct questions, ordering my food, etc. Anna will gently remind me to do this when I am reluctant to do this.</p> <p>2) When we go on tours of businesses, Anna will assist me to develop a list of questions. We will practice before the tour. This will also help me to not worry as much about talking with others.</p> <p>3) Anna will provide me with constructive feedback in a respectful manner.</p>
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To become knowledgeable of generally accepted workplace conduct and dress: Community Facility

<p>As a result of this service, I will:</p>	<p>To achieve my goal, we will:</p>
<p>Become more aware of acceptable workplace conduct and dress at companies/organizations that I might be interested in working at.</p>	<p>Observe workplace dress and conduct when I go on business tours. We will discuss our observations after each tour and how those observations can apply to being successful at work.</p>

To gain greater mobility by receiving mobility skills training: Community Facility

<p>As a result of this service, I will:</p>	<p>To achieve my goal, we will:</p>

Other: please specify, remember all goals in the CDP must be employment-related: Community Facility

You may add additional goals under "other." See instructions for details.

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As a result of this service, I will:	To achieve my goal, we will:

THE FOLLOWING THREE GOALS APPLY TO EMPLOYMENT PATH COMMUNITY ONLY:

To volunteer at a community organization. If you have an organization that you are interested in, please specify:

You and your SC or PA:	You and your Provider:
As a result of this service, I will:	To achieve my goal, we will:

To participate in services provided by my local career center. See directions for additional details.

As a result of this service, I will:	To achieve my goal, we will:
Know the following: 1. The businesses that hire people with the type of skills I currently have and/or if I need additional skills to make getting an individual landscaping job (one where I am not working in a mobile crew or	Go to the Career Center and find out who I should talk to in order to know #1 and #2. Follow-up on the information that I learn, including scheduling appointments and/or attending informational sessions sponsored by the career center.

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<p>enclave of other people with disabilities) more likely.</p> <p>2. The “in-demand” occupations for my community and what skills/experience they require. If I am interested in one or a variety of those occupations, to conduct further research including tours of community businesses, informational interviews (talking with people who either do those jobs or who hire people to perform those jobs.)</p>	
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To tour businesses to learn about employment opportunities. If you have certain interests, please specify: **I am interested in landscaping and other jobs that would allow me to work outside.**

As a result of this service, I will:	To achieve my goal, we will:
<p>1) Have an idea of the requirements/expectations and job/ career opportunities available in my community as it pertains to landscaping and other fields of interest that I have identified as a result of my time with my local career center.</p>	<p>1) Identify companies/organizations that I am interested in.</p> <p>2) Go to the library and other places (like the career center) so I can research these companies before asking for a tour.</p> <p>3) Ensure that I am prepared for my tour by making sure that I: Have my questions and am prepared to ask those questions and also demonstrate my knowledge of the company and the industry; Have appropriate attire, etc.</p> <p>4) Quickly follow-up with a thank you note to each company /organization that I tour and that I also follow-up on any other developments or steps that are outcomes of the meeting (we will keep the CDP updated with such developments.)</p>

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Select a provider of Small Group Employment Services and request the service from ODDS by 7 - 30 – 14

List the information for the person who completed the “provider” sections for this service

Name of Organization: Sertoma	Name & Title of Contact Person: Gene Harris, Mobile Crew Supervisor	Phone # & Email Address 503-345-6789
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You and Your SC or PA: As a result of this service, I will:	You and Your Provider: To achieve my goal, my job coach and I will:
<p>Become quicker at spreading bark dust.</p> <p>Know how to prune and fertilize roses and small, ornamental trees.</p> <p>Be skilled at operating the riding mower.</p> <p>Make mowing a part of my job duties.</p> <p>Get more hours as a part of the landscaping mobile crew and earn a raise.</p> <p>Get an individual job (one not done as a part of an enclave or mobile crew) either in landscaping or another area of interest.</p>	<ol style="list-style-type: none"> 1. Develop techniques/methods that will help me to be quicker. 2. When the crew needs to prune and/or fertilize roses and small, ornamental trees, I will watch, try and then explain what I learned to Gene – including talking about what was especially easy, hard or confusing. We will collaborate to address concerns. We will also find opportunities to build upon what I enjoy and/or am especially good at. (The CDP will be updated with this information.) 3. Apply the same process to mowing as we do to pruning/fertilizing. Gene and I will meet at a time when the crew is not working, so I can become familiar with the safety protocols for the mower. 4. Gene will give me weekly feedback on my performance and what I need to do to increase my hours and to earn a raise.

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Select a provider of ODDS-funded Job Coaching Support and request the service by - - Please check the service that you are requesting at this time: **Initial** **Ongoing** The goal of job coaching is to make you as independent, productive and included as work as possible. A good job coach knows the “less I am needed, the more I have succeeded.”

List the information for the person who completed the “provider” sections for this service

Name of Organization:	Name & Title of Contact Person:	Phone # & Email Address:
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You and Your SC or PA: To be successful at work, I anticipate that my job coach can best help me by:

You and Your Provider: To achieve my goal, my job coach and I will:

To select ODDS-funded job development, VR must have previously denied you services.

Help me to select a provider of ODDS-funded Job Development and request the service by MM/DD/YY

List the information for the person who will be your job developer.

Name of Organization:	Name & Title of Contact Person:	Phone # & Email Address:
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You and Your SC or PA: If you have chosen not to have a Discovery Profile created prior to job development, provide information about the type of job you want and other information that you consider to be important.

You and Your SC or PA: As a result of this service, I will:	You and Your Provider: To achieve my goal, my job developer and I will:
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Refer me to VR by - - : Please read the directions before selecting this option.

List the information for the person who will be your job developer.

Name of Organization:	Name & Title of Contact Person:	Phone # & Email Address:

You and Your SC or PA: If you have chosen not to have a Discovery Profile created prior to job development, provide information about the type of job you want and other information that you consider to be important.

You and Your SC or PA: As a result of this service, I will:	You & Your Job Developer: To achieve my goal, we will:
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Section 2. Other Documentation: I have the following document (s) Discovery Profile (ODDS) Individual Education Plan (IEP from school) Transition Plan (from school) Summary of Performance (from school) Individual Plan for Employment (VR) None of the Above Other, please specify:

Section 3: Do you have a résumé or another document detailing your work history? Yes (If so, attach it) No

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Section 4. The following is important information that I want my employment providers to know:

I am an extremely hard worker and enjoy working on a team.

Section 5. Potential barriers and/or areas that need special consideration: Whenever possible, please provide potential solutions. If you do not have a solution, this is an area that you and your employment provider (s) need to collaborate on.

<i>Potential Barriers and/or Areas of Special Consideration</i>	<i>Solution and/or Potential Solution</i>
<p><i>I am concerned about the effects of working on my social security benefits.</i></p> <p><i>Transportation to work</i></p>	<p><i>Scheduling an appointment with a benefits specialist by 9/1/2014.</i></p> <p><i>To get a job on the bus line.</i></p>

Section 6: People who helped me to create my CDP: Please type or clearly print

Printed Name	Signature	Role in My Life	Employer (Only needed if the person is paid to provide ODDS or VR services to you)	Phone # & Email Address
John Cunningham	(Each person would sign their name in this column)	self		503-123-4567 jcunningham@yahoo.com

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Bob and Marge Cunningham		Parents		503-446-9876 J&mcunningham@yahoo.com
Theresa Johnson		Sister		503-987-0965 tjohnson@yahoo.com
Gene Harris		Job Coach at landscaping mobile crew	Sertoma	503-345-6789 GeneH@sertomaportland.org
Anna Gonzalez		Supports me in Employment Path Community	Sertoma	503-987-6543 AnnG@sertomaportland.org
Jane Smith		Services Coordinator	Multnomah County CDDP	503-423-4567 Jane.Smith@yahoo.com

X

Person

(John would sign.)