

Empowerment Through Opportunity – Client Participation Sheet
(Report of DVR Client Health, Job Search and Skill Building Activities)

Client: _____ **Phone #** _____

Counselor: _____

Month: _____ **Year:** _____ **Week: (1) (2) (3) (4) (5)**

Supported Employment: Yes No Work Experience [] OJT []

Appointment Time _____ : Early/On Time - Late: _____ minutes - Client Cancelled - No Show

HEALTH

Current General Health: Good (1) (2) (3) (4) (5) **Average** (6) (7) (8) (9) (10) **Poor**

Sleep Patterns: Good (1) (2) (3) (4) (5) **Average** (6) (7) (8) (9) (10) **Poor**

Average Hours of Sleep Nightly: (1 to 3) (4) (5) (6) (7) (8) (9 or More) **Naps?** Yes No

Diet and Proper Nutrition: Good (1) (2) (3) (4) (5) **Average** (6) (7) (8) (9) (10) **Poor**

Have you had any medication changes this past week? (Yes) (No)

If so, what were the changes? _____

Mental Health: Depression – Anxiety – Other: _____

Low (0) (1) (2) (3) (4) (5) **Moderate** (6) (7) (8) (9) (10) **High**

Pain / Cause: _____

Low (0) (1) (2) (3) (4) (5) **Moderate** (6) (7) (8) (9) (10) **High**

Location(s): _____

Did you see your doctor this past week? (Yes) (No)

Dr. _____ for _____

Were you hospitalized this past week? (Yes) (No)

Result: _____

CHANGES IN CIRCUMSTANCES

Transportation: _____

Housing: _____

Childcare: _____

Legal Issues: _____

New Health Issues: _____

Other: _____

LEVEL OF PERSONAL PARTICIPATION TOWARDS EMPLOYMENT GOAL

Did you attend any Empowerment Through Opportunity Classes? (Yes) - (No)

(Cover Letter - Resume - Thank you Notes - Personal Presentation - Interviewing)

Individualized Coaching - (Daily Living Counseling - Life Skills - Employment Readiness)

Did you participate in any Computer Training? (Yes) - (No) **Job Search** (Yes) - (No)

(Basic Internet and Email) - (Word) - (Excel) - (Access) - (Power Point) **Typing:** _____ wpm

Employer Contacts: **Participating in Reading and Writing Classes?** (Yes) - (No)

1. _____ (Cover/Resume) (Application) (Interview)

2. _____ (Cover/Resume) (Application) (Interview)

3. _____ (Cover/Resume) (Application) (Interview)

4. _____ (Cover/Resume) (Application) (Interview)

5. _____ (Cover/Resume) (Application) (Interview)

6. _____ (Cover/Resume) (Application) (Interview)

Are dressed to see an employer if asked to do so right now? (Yes) (No) If no, why not?

Client Signature: _____ **Date:** _____