

SAMPLE
INDIVIDUALIZED SUPPORT PLAN
EMPLOYMENT

Project Name Here: _____ XYZ Employment Program _____

Individual's Name: _____ Joe _____ Date: _____ 1/17/08 _____

Identification Number: _____

This document is completed by the individual and significant people in the individual's life. The plan must identify the need for/extent of the service/support as well as the level/type of support to be provided. The plan identifies the projected outcomes and support needs of the individual. Outcomes must relate back to the PLB outcomes. Agencies will use Person Centered/Individual Support Plans in the delivery of service/supports to consumers.

Identify and list individual's need for and extent of the service support to be provided:

Joe likes to talk with people and can easily get off task. Verbal reminders keep Joe on task. Joe may wonder off if not engaged, he does best when given tasks which are located in one area.

Discuss the level and type of support/service to be provided:

Support been faded since he has developed natural supports/employee peers at work.

Outcome: Persons with developmental disabilities retain their employment.

Goal #1 Joe has been employed at Home Depot for two years and will remain employed with the support of the supervisor and retention specialist.

Outcome: Persons with developmental disabilities form new relationships that support them at work and in their community.

Goal #1 Joe will be supported in attending after work functions and activities to form new relationships.

SIGNATURE PAGE

List of individuals who contributed in the development of the individual's support plan:

Consumer's signature	Date
Guardian's Signature	Date
Coordinator's signature	Date
Staff completing support plan (if different)	Date