**King County School-to-Work Exit and CSA Request Form**

**Complete Section 1** if the student is currently employed. **Complete Section 2** if the student is not yet employed. Email the completed form to King County School-to-Work: [S2WReports@kingcounty.gov](mailto:S2WReports@kingcounty.gov)

**Participant’s Name** (*encrypt if included*):       **ADSA ID #**:

**Provider**:

Section 1: Student Who Is Employed

*A CSA Approval is Dependent on Written DVR Confirmation of Stabilization to the County*

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| **Employer**:       **Employment Start Date**:  **Typical Work Schedule**: (Example: 6 hours; 9 am to 3:30 pm)  Monday Hours:       **Hourly Wage**:  Tuesday Hours:  Wednesday Hours:  Thursday Hours:  Friday Hours:  Saturday Hours:  Sunday Hours:  **Total**:    **Is the student stable on the job?**  **Yes:**  DVR Verified Date:       **No**:  Estimated Date:  **Describe the support provided**:  **Describe the plan to decrease support hours, if applicable**:  **Requested Monthly Support Hours**:  Job Support Hours:  Record Keeping Hours:  Job Coach Travel Hours:  Access/Transit Wait Hours:  **Total**:  **Requested CSA Start Date**: |

Section 2: Student Who Is Not Yet Employed

*An Updated Placement Goal Date and Estimated Support Hours Are Required to Plan for a CSA Start**Date*

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| **What target date has the student’s Interagency Team set for job placement? Month**:  **Estimate the monthly support hours required to achieve the placement goal**:  Job Development / Marketing Hours:  Record keeping Hours:  **Total**:  **Upon Job Placement:**  Estimate the monthly support hours to achieve stabilization:  Estimate the number of weeks needed to achieve stabilization:  **Describe the needed support for placement and/or stabilization**:  **Describe the plan to decrease support hours, if applicable**: |

**Agency Contact**:       **Phone**:       **Email**: