**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

**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*

|  |
| --- |
| **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*

|  |
| --- |
| **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**: