



## Promoting Workplace Learning Experiences for Students with Significant Disabilities

Date: \_\_\_\_\_

LEA: \_\_\_\_\_

Student Name: \_\_\_\_\_  
(First Name Only)

CSC: \_\_\_\_\_

### Student Description Summary:

What is written in the student's IEP/ITP specific to employment?

Tell us a little about the student including your experience with the student and/or family?

### Person Driven Planning:

What does the PDP include specific to employment preparation?

### BACKGROUND EXPERIENCE:

#### School/Community:

What types of school sponsored community based activities does the student participate in as part of his/her school program?

#### Home/Community:

What types of family supported community based activities does the student participate in?

### Accommodations:

What kinds of accommodations will the student need to participate in non-paid & paid internships?

### Service Needs:

What kinds of services will the student need to participate in non-paid & paid internships?

### Recommended workplace/community based activities: