

ARIZONA DEPARTMENT OF ECONOMIC SECURITY – Rehabilitation Services Administration  
**JOB PLACEMENT REPORT**

Reporting Month and Year: August 2025

Vendor Company Name: ABC Vendor Company

Vendor Representative's Name: Lilly Coach

VR Client Name: Jacob Client

VR Counselor Name: Dan Counselor

RSA Authorization #: 000000000A1

**Employment Information**

Starting Date of Employment (MM/DD/YYYY): 08/15/2025

Employer's Name: PetSmart

Employer's Address: 1212 Cherry Tree Lane

Employer's Contact Phone Number or Email Address: 623-555-5555

Employer's Contact Person: Stacy Employer

VR Client Job Title: Veterinarian Technician

VR Client Rate of Pay for position: \$13.00  Per hour  Annually  Other \_\_\_\_\_

Frequency of Pay:  Weekly  Biweekly  Semimonthly  Other \_\_\_\_\_

Pay Range for this Position: \$12-\$17 per hour

Work Hours per Week: 30

VR Client Job Modifications/Accommodations: \_\_\_\_\_

Benefits Available:  Yes  No

Benefits Accepted by VR Client:

Medical/Health Insurance with Hospitalization:  Yes  No  N/A

Sick Leave:  Yes  No  N/A

Paid Vacation:  Yes  No  N/A

Pension Plan:  Yes  No  N/A

The VR Client's wage and benefits are at a level paid to non-disabled individuals for the same or similar work.

Yes  No (if no, please explain): \_\_\_\_\_

**\*\*Submission of pay stub, offer letter, or other supporting documents that verify employment (wage, benefits, start date, etc.) is preferable\*\***

Supporting Documents included:  Pay Stub  Offer Letter  Other \_\_\_\_\_

If Supporting Documents are not included, please complete all sections below:

Date of Notification (MM/DD/YYYY): 08/15/2025

Method of Notification:  Employer Notification  Client Notification

Summarize attempts to gather supporting documents to verify employment and justification for VR Client not providing supporting documents: Lilly Coach sent emails to Jacob Client on 8/15, 5/19, and 8/26 to request a copy of the offer letter issued but VR Client has not been responsive.

**VR Client's Signature:** Jacob Client Date: 08/31/2025

If the VR Client's signature is not obtained, include justification: \_\_\_\_\_

**Vendor Representative Signature:** Lilly Coach Date: 08/31/2025

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