ARIZONA DEPARTMENT OF ECONOMIC SECURITY Division of Developmental Disabilities (DDD) Employment Supports & Services

INDIVIDUAL SUPPORTED EMPLOYMENT SERVICES Quarterly Report

QUALIFIED VENDOR I	NFORMATIO	N						
QUALIFIED VENDOR NAME				CONTACT	PERSON NAME			
MAILING ADDRESS (No., Street)								
CITY	S ⁻	TATE ZIP CODE	≣	EMAIL ADDRE	SS			
MEMBER'S NAME			SUPPOF	RT COORDINAT	OR			
REPORT PERIOD (Check one):	1st	Quarter (Due by April 15t	h)	3rd Quarter <i>(Due</i>	e by October 15th)			
,		d Quarter (Due by July 15	•	•	by January 15th)			
MEMBER NAME		MEMBER ID NUMBER		SERVICE	EMPLOYMENT OBTAINED (Yes/No)	JOB COACH SERVICE START DATE	JOB COACH SERVICE END DATE	EMPLOYMENT MAINTAINED (Yes/No)
	MONTH/YEAR		MONTH	YEAR	•	MONTH/	YEAR	
HOURS AUTHORIZED:						_		
HOURS BILLED:								
HOURS MEMBER WORKED:								
MEMBER'S EMPLOYER								
MEMBER'S JOB TITLE			HOU	IRLY PAY		HOURS WORK	ED PER WEEK	
Member's Individual Suppo	ort Plan (ISP) Er	nployment Outcome(s	s):					

rogress Made on Above Outcome(s):	
avview Kaaning Individual from Making a Dyagyagaiya Maya ta Cammunit	Integrated Employments
arrier Keeping Individual from Making a Progressive Move to Community e. Member choice; family choice; challenging behavior; health issues; ne	
and the Control Address Benden Detect Alberta	
an of Action to Address Barrier Listed Above:	
	ning; employer outreach; health care changes; other)
	nning; employer outreach; health care changes; other)
	nning; employer outreach; health care changes; other)
e. Member education; family education; DB101; Behavior Treatment Plan	nning; employer outreach; health care changes; other)
i.e. Member education; family education; DB101; Behavior Treatment Plan	nning; employer outreach; health care changes; other)
e. Member education; family education; DB101; Behavior Treatment Plan	nning; employer outreach; health care changes; other)
i.e. Member education; family education; DB101; Behavior Treatment Plan	nning; employer outreach; health care changes; other)
e. Member education; family education; DB101; Behavior Treatment Plan	
e. Member education; family education; DB101; Behavior Treatment Plan	QUALIFIED VENDOR ADMINISTRATOR/DESIGNEE'S TITLE
.e. Member education; family education; DB101; Behavior Treatment Plan lember's Work-Related Accomplishments: ALIFIED VENDOR ADMINISTRATOR/DESIGNEE'S NAME (Print)	
Plan of Action to Address Barrier Listed Above: i.e. Member education; family education; DB101; Behavior Treatment Plan Member's Work-Related Accomplishments: JALIFIED VENDOR ADMINISTRATOR/DESIGNEE'S NAME (Print) JALIFIED VENDOR ADMINISTRATOR/DESIGNEE'S SIGNATURE DUTING: Original – Support Coordinator	QUALIFIED VENDOR ADMINISTRATOR/DESIGNEE'S TITLE

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