

HAWAII DEPARTMENT OF HUMAN SERVICES - Division of Vocational Rehabilitation
Vocational and Work Adjustment Training Services - Adult
COMPLETION REPORT

Service Completion Report Date: 12/15/2025

Intake Plan Meeting Date: 9/8/25

Last Date of Participant Service: 11/30/2025

Vendor Company Name: ABC Vendor Company

Vendor Representative's Name: Rosalie Representative

VR Participant Name: Patty Participant

VR Counselor Name: Jane Counselor

DVR Purchase Order #: 07000010

1. REASON FOR VENDOR'S SERVICE COMPLETION

Please choose one:

☒ VR Participant successfully completed the core work readiness/employability skills objectives with a Vocational and Work Adjustment Training Services Skills Appraisal Guide score of three (3) or four (4).

VR Participant did not successfully complete all core work readiness/employability skills objectives with a Vocational and Work Adjustment Training Services Skills Appraisal Guide score of three (3) or four (4) due to:

- ☐ Dissatisfaction with the service provision; VR Counselor or Participant requested another Vendor;
 - ☐ Moving out of service area;
 - ☐ Dropping out of services due to health issues;
 - ☐ Incarceration;
 - ☐ Vendor lost contact with Participant;
 - ☐ Change in Participant's circumstances; they no longer wish to pursue employment services;
 - ☐ Organizational or business changes by Vendor precludes further service to the Participant;
 - ☐ Vendor no longer willing to work with Participant;
 - ☐ Participant entered a drug treatment or rehabilitation facility;
 - ☐ VR Counselor determined services are no longer appropriate; or
 - ☐ Other reason for service completion (specify): _____
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2. SERVICE OBJECTIVES

Based on the final Vendor Representative Monthly Appraisal Score (Exhibit G3 - Monthly Progress Report), VR Participant successfully completed all Service Objectives with a score of three (3) or four (4) in the following core areas as specified on the Intake Plan (Exhibit G2):

	Yes	No	N/A
Mobility	☒	☐	☐
Communication	☒	☐	☐
Personal Care	☐	☐	☒
Self-Direction	☒	☐	☐
Interpersonal Skills	☒	☐	☐
Work Tolerance	☒	☐	☐
Work Skills	☒	☐	☐

VR Participant did not achieve a score of three (3) or four (4) in one (1) or more objectives; briefly state the objective(s) and describe barriers and/or recommendations: _____

If Job Readiness Training at a Work Site was completed, please provide feedback to DVR of how the VR Participant applied learned objectives from the curriculum for Mobility, Communication, Personal Care, Self-Direction, Interpersonal Skills, Work Tolerance, and Work Skills: Participant was engaged and highly motivated to apply the skills learned from the curriculum to their job role. They exceeded expectations when it came to all objectives (based on conversations with management) and showed that they not only understood what they learned but were able to successfully apply it per task that they were assigned.

Vendor Representative Signature: Rosalie Representative Date: 12/15/2025