

Vocational Immersion Program (VIP) Parent Input Form	1

Person Completing	Form:		Date:			
VIP Applicant's Nan	ne:		Relationship to app	olicant		
• •			bes his or her present level he categories outlined belo	•		
1 - Very Poor	2 - Poor	2 – Fair	1 - Good	5 - Very Good		

Category	1	2	3	4	5	Comments
Motivation						
Reliability						
Perseverance						
Adaptability						
General Attitude						
Ability to Make Independent Decisions						
Ability to act in an Emergency with Good Judgment						
Utilization of Resources						
Ability to Adjust Well to New Situations						
Keeping Track of Belongings						
Coping with Stress						
Following Directions from Teachers/Adults						
Interactions with Peers with Disabilities						
Interactions with Peers without Disabilities						
Interactions with Children						
Interactions with Supervisors						



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Describe applicant's vocational/work experiences in the home and/or community setting. List particular work assignments, level of productivity, need for adult support, ability to focus, quality of work, etc. Has the applicant had experience volunteering in the community? Please explain.
Describe the applicant's skills acquisition process. How long does it take for the applicant to master a skill and retain it? Does applicant need frequent re-teaching and/or repetition to maintain skill mastery?
Describe applicant's ability to self-advocate and problem solve. Does he or she request help or ask for clarification independently? Does he or she seek out an adult when he or she has a problem or conflict?
Has the applicant stayed away from home without family (camp, retreats, sleepovers with friends, etc.)? If so, describe applicant's experience in those settings.
Has the applicant experienced any mental or emotional distress or difficulties within the last six months? If so, please explain.
Do you feel that the applicant would actively participate in this program?
What vocational/work-related goals do you have for the applicant?
Additional Comments: