The Florida Department of Education, Division of Vocational Rehabilitation (VR) is here to help eligible individuals with physical and mental disabilities to find, keep or get a better job.

Please complete this page and mail or turn in the referral to the nearest VR office. For a list of offices, go to the [VR Website](http://www.RehabWorks.org) and click on “Contact Us.” Then select “Directory of Local VR Offices and Vendors;” or call toll free (800)-451-4327.

**Date of Referral**

| **Name of Individual (Please Print)** | | | | | | | | | **Date of Birth** | | | | | | | | | **Social Security Number** | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Address (Home)** | | | | | | | **City** | | | | | | | | **State** | | | | | | **Zip** | | |
| **Address (Mailing)** | | | | | | | **City** | | | | | | | | **State** | | | | | | **Zip** | | |
| **Telephone Number** | | Home | | | | Cell | | | | | | **Additional Contact Name** | | | | | | | | | | | |
| **Additional Contact Phone Number** | | | | | | | | | | | | **Additional Contact Email** | | | | | | | | | | | |
| **What is the best method of contact? (Select one)** | | | | | | | | | | | | | | | | | | | | | | | |
| Email | | | Mail | | | | | | | | | Phone | | | | | Other (specify) | | | | | | |
| **Can VR leave a message at the number listed above?** | | | | | | | | | | | | | Yes | | | | | | | | | No | |
| **Gender** | | | | Male | | | | | | | Female | | | | | | Does not wish to disclose or self-identify | | | | | | |
| **Email Address** | | | | | | | | | | | | **Have you ever received services from VR?**  Yes  No | | | | | | | | | | | |
| **Education Level** | | | | | | | | | | | | | | | | | | | | | | | |
| **Marital Status** | Divorced | | | | Married | | | | | | | Never Married | | | | | | | Separated | | | | Widowed |
| **Ethnicity** | | | | | | | | | | | | | | | | | | | | | | | |
| Hispanic or Latino | | | | | Not Hispanic or Latino | | | | | | | | | | | | Does not wish to disclose or self-identify | | | | | | |
| **Race (Check all that apply)** | | | | | | | | | | | | | | | | | | | | | | | |
| American Indian/Alaska Native | | | | | | | | | | Asian | | | | Black or African American | | | | | | | | | |
| Native Hawaiian or Other Pacific Islander | | | | | | | | | | White | | | | Does not wish to disclose or self-identify | | | | | | | | | |
| **Accommodations** | | | | | | | | | | | | | | | | | | | | | | | |
| Do you require an Interpreter? | | | | | | | | | Yes, ASL | | | | | | | Yes other, specify language: | | | | | | | |
| Do you require translated documents | | | | | | | | | Yes | | | | | | | | | | | | | | |
| Do you require an assistive listening device? | | | | | | | | | Yes | | | | | | | | | | | | | | |
| Do you require any other accommodations for your impairment? | | | | | | | | | | | | | | | | Yes If so, please explain: | | | | | | | |
| **What impairment prevents you from working?** | | | | | | | | | | | | | | | | | | | | | | | |
| **How can VR help you become employed?** | | | | | | | | | | | | | | | | | | | | | | | |
| **How did you hear about us?** | | | | | | | | | | | | | | | | | | | | | | | |
| **Agency/Vendor/School:** | | | | | | | | **Contact Person:** | | | | | | | | | | | | **Phone #:** | | | |

| **For Office Use Only** | Received Date : | | | Phone | | | Mail | In Person | | Fax |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Contact Date: | Contacted by: | | | | | Phone | Letter | | In Person |
|  | Orientation Scheduled: | Date: | | | | | Group | Individual | | Video |
|  | Additional Notes: | | | | | | | | | |
|  | **Outcome of Referral** | | Completed Application | | Decided not to apply | | | | Missed Orientation | |
|  |  | | Completed Orientation | | | Other | | | | |

The Florida Vocational Rehabilitation program receives 78.7 percent of its funding through a grant from the U.S. Department of Education. For the 2021 Federal fiscal year, the total amount of grant funds awarded were $176,836,896. The remaining 21.3 percent of the costs ($47,860,557) were funded by Florida State Appropriations. Revised October 2021.

local street address line 1 • city, state, zip • phone • Fax: fax number