# *Supported Employment / Non Supported Employment Situational Assessment - Community Based (SAC)*

**REPORT PROVIDED BY:** _____ **Phone:**_____

**AGENCY (VENDOR) REPORTING:** _____

**SUBMITTED TO ORS COUNSELOR:** _____

Client Name: _____ No. of Days at Site: _____

Employer/Company: _____ No. of Hours per Day: _____

Job Title: _____

1. **Job Duties** - describe job tasks, physical demands, and employer expectations:

***(include as much detail as possible)***

2. **Job Performance Results** - describe ability to independently perform job tasks including a productivity measure, and individual's ability to meet employer expectations:

***(include as much detail as possible)***

3. **Job Behavior Results** - describe client's ability to adhere to work routine, dependability and reliability, follows directions, and appropriately works with others:

***(include as much detail as possible)***

4. **Needed Supports –** what supports are needed for the client to perform the job (on or off the job), as well as anticipated long term supports:

***(include as much detail as possible)***

# *Summary of SAC and Recommendations*

Evaluator: _____ Date: _____