



# Iowa Vocational Rehabilitation Services

## Application for Services



Please provide as much information as is known. If you would like assistance with this form, do not hesitate to ask. If you need more space, please use an additional piece of paper. An IVRS representative will contact the applicant within two weeks of receipt of this form to schedule an appointment.

### Personal Information:

First Name\*: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name\*: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Maiden or Other Names Used: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State\*: \_\_\_\_\_ Zip\*: \_\_\_\_\_ County\*: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

May IVRS send text messages?  No  Yes

Primary E-Mail: \_\_\_\_\_ Secondary E-Mail: \_\_\_\_\_

Preferred Method of Communication:  E-mail  Phone  Video Relay  Letter

Social Security Number\*: \_\_\_\_\_ Date of Birth\*: \_\_\_\_\_ Age: \_\_\_\_\_

Do you have a specific low vision impairment that presents difficulty for you in preparing for, obtaining, or maintaining employment; or are you considered legally blind?  No  Yes

Do you require an interpreter?  No  Yes Language: \_\_\_\_\_

### Contact Information:

Is there a relative who would usually be able to help us contact you?

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Is there someone outside of your household who would usually be able to help us contact you?

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Legal Guardian:

Do you have a court-appointed legal guardian?  No  Yes (If Yes, please provide name and contact information below.)

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Referral Source:**

Who referred you to IVRS?

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

What is the reason they suggested you apply for services? \_\_\_\_\_

I have been referred because I am currently working in subminimum wage employment or I am considering work at subminimum wage.



**STOP HERE--Please send the form to your local IVRS office.**

Please bring the following information to the appointment:

**Copies of Documents Necessary to Comply With Form I-9, Employment Eligibility Verification.**  
Driver's License, Social Security Card, Passport, Work VISA, School Record (high school students), etc.

**Information about Your Disability**  
When it started and how it affects your ability to work.

**Information about Any Treatment, Past or Present**  
Medical reports already in your possession, names and addresses of doctors, hospitals, clinics, etc.

**Information about Your Education**  
Names and dates of attendance of high school, college, or vocational schools, etc. Bring grade reports or transcripts if available.

**Information about Any Jobs You Have Held**  
Summary of any work you have done and a copy of your résumé, if you have one

**Information about Other Services You Receive**  
Public Assistance, Social Security Benefits--proof of SSI, SSDI benefit (i.e. check stub, letter of eligibility, etc.), Family Investment Plan (FIP), etc.

**IVRS USE ONLY: If low vision question is checked, "yes" send referral to IDB and notify the individual. If the individual does not want to be referred to IDB, notify him/her that IVRS does not serve this population.**

**Source of Referral \***

- 14(c) Certificate Holders
- Adult Education and Literacy Programs
- American Indian VR Services Program
- Centers for Independent Living
- Service Providers including CRPs
- DOL Adult, Dislocated Worker, and Youth Program
- Elementary/Secondary Schools
- Post-secondary Educational Institutions
- Employers
- Extended Employment Providers
- Intellectual and Developmental Disabilities Providers
- Managed Care Organizations (MCOs)
- Medical Health Provider
- Mental Health Provider
- Self-referral, friends or family
- Social Security Administration
- Temporary Assistance for Needy Families (TANF)
- Veteran's Benefits or Health Administration
- Wagner-Peyser Employment Service Program
- Worker's Compensation
- Other Sources
- Other American Job Center or Workforce Development Programs

**Date Received by IVRS:** \_\_\_\_\_

**Notes:**



Iowa  
**Vocational  
Rehabilitation**  
Services

*Finding solutions. Generating success.*

Kim Reynolds, Governor  
Adam Gregg, Lt. Governor  
Ann E. Lebo, Director  
Department of Education  
David L. Mitchell, Administrator

May 07, 2020

To Family Wellness Associates,

We understand that the COVID-19 crisis has made it difficult for everyone when it comes to finding employment, especially for those who have any disability diagnoses or work barriers that may require special accommodations in work environments. Iowa Vocational Rehabilitation Services is trying their best to serve our current and potential job candidates during this difficult time.

We are reaching out to community agencies and facilities across the Siouxland area to let them know that Iowa Vocational Rehabilitation Services is still accepting referrals for individuals with any disability diagnoses or work barriers that may need our services in helping them find employment that can accommodate to their limitations.

I encourage you to read through the brochure included with this letter. If your agency has any individuals who might fit our criteria and believe they may benefit from our services, please complete the form included and forward it in one of several ways below to our agency.

**Mailing Address:**

Iowa Vocational Rehabilitation Services  
Att: Referral Information  
2508 4<sup>th</sup> Street  
Sioux City, IA 51101

**Fax Number:**

(712) 277-1394

**Clerical Emails:**

Amanda Beougher (Secretary II) - amanda.beougher@iowa.gov  
Myko Williams (Rehabilitation TA) - myko.williams@iowa.gov  
Jamie Anderson (Rehab Assistant) - jamie.anderson@iowa.gov

**Office Supervisor:**

Brittney Gutzmann  
Ph: (712) 899-4620  
Email: brittney.gutzmann@iowa.gov

If you would like to talk to someone about Iowa Vocational Rehabilitation Services, you may call our temporary General Assistance line at: (323) 457-8745.

Thank you and we hope to hear from you soon.

Sincerely,

**Myko Williams**  
Rehabilitation TA  
Iowa Vocational Rehabilitation Services  
2508 4<sup>th</sup> Street  
Sioux City, IA 51101-2298

1. Introduction  
2. Methodology  
3. Results  
4. Discussion  
5. Conclusion

Abstract  
Keywords

The first section of the paper discusses the background and the objectives of the study. It also provides a brief overview of the methodology used in the research.

The second section presents the results of the study. The data shows that there is a significant correlation between the variables being studied.

The third section discusses the implications of the findings. It suggests that the results have important implications for the field of study.

The fourth section provides a detailed analysis of the data. It examines the relationship between the variables and discusses the factors that may influence the results.

The fifth section concludes the paper by summarizing the main findings and providing recommendations for future research.

In conclusion, the study has shown that there is a strong relationship between the variables. Further research is needed to explore the underlying mechanisms.

The authors would like to thank the funding agency for their support. They also thank the participants for their contribution to the study.

The data for this study was collected from a survey of 100 participants. The survey was conducted over a period of six months.

The results of the study are presented in the following tables and figures. These provide a visual representation of the data and the relationships between the variables.

The study has several limitations. First, the sample size was relatively small, which may affect the generalizability of the findings.

Future research should focus on larger samples and more diverse populations. This will help to better understand the underlying mechanisms and the implications of the findings.