			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report		Definitions or Instructions	Code Values
1	Program Year	INT 4	No	No		Application or Initial Receipt of Pre- Employment Transition Service, Update as Needed	Quarterly	Yes	Report the program year associated with the reporting period. Program year begins in July and ends in June of the following year.	XXXX
<u> </u>	rrogram rear	1141 4	INO	140		opuate as Needed	Quarterry	res	Tonownig year.	7000
2	Program Year Quarter	INT 1	No	No		Application or Initial Receipt of Pre- Employment Transition Service, Update as Needed	Quarterly	Yes		1 = July 1- September 30 2 = October 1- December 31 3 = January 1- March 31 4 = April 1- June 30
						Application or Initial Receipt of Pre- Employment			Report the code value assigned to the VR agency submitting	
4	Agency Code	INT 3	No	No		Transition Service	Quarterly	No	the data from Appendix 1.	Valid values listed in Appendix 1
				Modified		Application or Initial Receipt of Pre-			When assigning the identifier, the first two digits are the State's Postal Code followed by a unique 10-digit number that is not associated with the individual's SSN. The number must not duplicate any other assigned unique identifiers used in the State by another VR agency.  When assigning a unique identifier, ensure that the same 12-digit identifier is used in subsequent years for the same individual if additional service records are opened for that individual in the future. This is necessary to obtain an unduplicated count of individuals being served in a State.  Note: The Postal Code used should be the State agency's	
				Reporting		Employment			Postal Code, not the State in which the individual resides or	
5	Unique Identifier  Social Security Number	VARCHAR 12 VARCHAR 9	No No	Instruction	100	Application or Initial Receipt of Pre- Employment	Quarterly When Occurs	No No	the State from where the case was transferred.  Report the individual's nine-digit SSN.  Note: SSN is not a required field.	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
						Application Data			Report the date (year, month, and day) that the agency received a completed and signed application form for VR services from the applicant.  The date must be verifiable through supporting	
7	Date of Application	DATE	No	No		Elements	Quarterly	No	documentation.	YYYYMMDD
8	Date of Birth	DATE	No	No	200	Application or Initial Receipt of Pre- Employment Transition Service	Quarterly	No	Report the applicant's date of birth.	YYYYMMDD
							,			1 = Male
	Sex	INT 1	No	No	201	Application Data Elements	Quarterly	No	Report the applicant's sex.	2 = Female 9 = Participant did not self-identify
3	900		140		201	Application or Initial Receipt of Pre- Employment	<u>Quartelly</u>	,,,,	An individual having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.  This element is required for all individuals in elementary or secondary education. If an individual in elementary or secondary education chooses not to self-identify race,	1 = Individual is 0 = Individual is not
10	American Indian / Alaska Native	INT 1	No	No	211		Quarterly	No	individual to a race/ethnicity.	9 = Participant did not self-identify

Clamant			Multiple					Updateable (Y/N) after		
Element Number	Element Name	Data Type	Values Allowed	Change	PIRL Element	Report at	Report		Definitions or Instructions	Code Values
									An individual having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.	
11	Asian	INT 1	No	No	212	Application or Initial Receipt of Pre- Employment Transition Service	Quarterly	No		1 = Individual is American Indian / Alaska Native 0 = Individual is not American Indian / Alaska Native 9 = Participant did not self-identify
						Application or Initial			An individual having origins in any of the Black racial groups of Africa.  This element is required for all individuals in elementary or secondary education. If an individual in elementary or	
12	Black / African American	INT 1	No	No	213	Receipt of Pre- Employment Transition Service	Quarterly	No	observer identification should be used to assign the	1 = Individual is Black / African American 0 = Individual is not Black / African American 9 = Participant did not self-identify
						Application or Initial Receipt of Pre-			An individual having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.  This element is required for all individuals in elementary or secondary education. If an individual in elementary or secondary education tooses not to self-identify race,	1 = Individual is Native Hawaiian /Other Pacific Islander
13	Native Hawaiian /Other Pacific Islander	INT 1	No	No	214	Employment Transition Service	Quarterly	No	observer identification should be used to assign the individual to a race/ethnicity.	0 = Individual is not Native Hawaiian /Other Pacific Islander 9 = Participant did not self-identify
14	White	INT 1	No	No	215	Application or Initial Receipt of Pre- Employment Transition Service	Quarterly	No		1 = Individual is White 0 = Individual is not White 9 = Participant did not self-identify
									An individual of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.  This element is required for all individuals in elementary or	
15	Ethnicity: Hispanic / Latino	INT 1	No	No	210	Application or Initial Receipt of Pre- Employment Transition Service	Quarterly	No	secondary education. If an individual in elementary or secondary education chooses not to self-identify race,	1 = Individual is Hispanic / Latino 0 = Individual is not Hispanic / Latino 9 = Participant did not self-identify
16	Veteran	INT 1	No	No		Application Data Elements	Quarterly	No	Report the code value to indicate whether the applicant served in the active military, navel, or air service, and was discharged or released under conditions other than dishonorable.	1 = Individual is a Veteran 0 = Individual is not a Veteran
									Report the two-letter State Postal Code for the State or U.S. Territory corresponding to the location of the individual's residence.	
18	State Postal Code of Residence	VARCHAR 2	No	No	101	Application Data Elements	Quarterly	No	For persons on active military duty, report the two-letter Air/Army Post Office (APO) or Fleet Post Office (FPO) as defined by the Military Postal Service Agency.	Valid values listed in Appendix 1

			Multiple					Updateable		
Element Number	Element Name	Data Type	Values Allowed	Change	PIRL Element	Report at	Report	(Y/N) after initial reporting	Definitions or Instructions	Code Values
									Report the FIPS county code for the individual's residence.	
									This code is a five-digit Federal Information Processing	
									Standard (FIPS) that uniquely identifies counties, county equivalents, and certain U.S. territories. The first two digits	
									are the FIPS State code and the last three are the county	
									code within the State or territories. The codes can be located	
19	County FIPS Code	INT 5	No	No		Application Data	Quarterly	Yes	at the U.S. Census Bureau website: https://www.census.gov/geo/reference/codes/cou.html	xxxxx
19	County Firs Code	IINT 3	INO	INO		Application Data	Quarterry	ies	Report the five-digit numeric U.S. Postal Service Zip Code	^^^^
20	ZIP Code	INT 5	No	No		Elements	Quarterly	Yes	where the individual resides.	xxxxx
				Modified list		Application Data			Report the source that first referred the applicant to the VR	
21	Source of Referral	INT 2	No	of choices		Elements	Quarterly	No	agency by using one of the following code values.	See Appendix 2 for detailed disability types and sources
										1 = Individual is a student with a disability and has a section 504 accommodation 2 = Individual is a student with a disability and is receiving transition services under an
										Individualized Education Program (IEP)
										3 = Individual is a student with a disability who does not have a section 504
22	Student with a Disability	INT 1	No	No		Application Data Elements	Quarterly	Yes		accommodation and is not receiving services under an IEP O = Individual is not a student with a disability
	State in a bisability		110			Liemento	Quarterry			0 = Individual does not receive public support
										1 = Individual receives Social Security Disability Insurance (SSDI)
				N		Aliantina Bata			Report the individual's public support at application. If the	2 = Individual receives Supplemental Security Income (SSI)
l <sub>xx</sub>	Public Support at Application	VARCHAR 7	Yes	New element number		Application Data Elements	Quarterly	No	individual receives more than one type of public support, use a semicolon between each type.	3 = Individual receives Temporary Assistance for Needy Families (TANF) 4 = Individual receives other public support from another source
							, , , , , , , , , , , , , , , , , , ,		,	
										0 = Applicant does not have medical insurance coverage 1 = Applicant has Medicaid
										2 = Applicant has Medicare
										3 = Applicant is receiving benefits through the State or Federal Affordable Care Act
										Exchange at the time of application 4 = Applicant has public insurance outside of Medicare, Medicaid, or the Affordable
										Care Act exchange
									Report the individual's medical insurance coverage at	5 = Applicant has private insurance through employer
	Medical Insurance Coverage at			New element		Application Data			application. If the individual has more than one type of medical insurance, use a semicolon between each type. A	6 = Applicant is not eligible for private insurance through a current employer, but will be eligible for private insurance after a certain period of employment
хх	Application	VARCHAR 5	Yes	number		Elements	Quarterly	No	limit of three types of insurance may be provided	7 = Applicant has private insurance through other means
									Report the date that the initial eligibility determination was	
									made.	
									The date must be verifiable through supporting	
38	Date of Eligibility Determination	DATE	No	No		Eligibility	Quarterly	No	documentation.	YYYYMMDD
									Report if the applicant and counselor mutually agreed upon	
									an extension (of time) for eligibility determination within 60	
									days of the individual's application for VR services.	
				Modified					The date must be verifiable through supporting	1 = An agreed upon eligibility determination extension was completed
39	Eligibility Determination Extension	INT 1	No	definition		Eligibility	Quarterly	Yes	documentation.	0 = An agreed upon eligibility determination extension was completed
40	Date of Placement on OOS Waiting List	DATE	No	No		Order of Selection (OOS) Data Elements	Quarterly	No	Report the date, if applicable, that the applicant was placed on an OOS waiting list.	YYYYMMDD
F	Date of Fracement on Goo waiting list	57.11	1.10			1,555) Data Elements	Quarterry		on an oos wating ist.	TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT
l.,			<b>I</b>	<b>.</b>		Order of Selection	<u>.</u>	l	Report the date, if applicable, that the applicant exited from	NAME OF THE OWNER O
41	Date of Exit from OOS Waiting List	DATE	No	No		(OOS) Data Elements	Quarterly	NO	an OOS waiting list.	YYYYMMDD
										1 = Individual reports that he/she has any "disability", as defined in section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102)
						Disability Data			Leave blank if the individuals exited as an applicant with	0 = Individual reports that he/she does not have a disability that meets the definition
42	Individual with a Disability	INT 1	No	No	202	Elements	Quarterly	No	Type of Exit (354) code 0.	9 = Individual did not self-identify
42	Individual with a Disability	INT 1	No	No	202		Quarterly	No		

			Multiple					Updateable		
Element Number	Element Name	Data Type	Values Allowed	Change	PIRL Element	Report at	Report	(Y/N) after	Definitions or Instructions	Code Values
Number	Element Name	Data Type	Allowed	Change	rike Element	Report at	пероп	mittar reporting	Definitions of instructions	code values
									Report the code value that best describes the individual's	
									primary physical or mental disability that causes or results in	
									a substantial impediment to employment. The data reported	
									is a combination of the Type of Disability code found in	
									Appendix 3 and the Source of Disability code found in	
									Appendix 4. The first two digits designate the Type of Disability (sensory, physical, or mental), and the last two	
									digits indicate the cause or Source of Disability. Use a	
									semicolon between the Type of Disability code and the	
									Source of Disability code. Do not use spaces or commas	
									between the code values.	
									If the individual is found not to have a disability, this item	
									should be coded 0;0.	
43	Primary Disability	VARCHAR 5	Yes	No		Disability Data Elements	Quarterly	Yes	Leave blank if the individual exited as an applicant with Type of Exit (354) code 0.	See Appendix 3 for valid disability types and Appendix 4 for valid sources.
45	Fillially Disability	VAICHARS	163	140		Liements	Quarterry	163	or Exit (334) code o.	See Appendix 3 for valid disability types and Appendix 4 for valid sources.
1										
									Report the code value that best describes the individual's secondary physical or mental disability that causes or results	
									in a substantial impediment to employment.	
									,	
									If the individual is found not to have a disability, this item	
									should be coded 0;0.	
						Disability Data			Leave blank if this element does not apply or if the individual	
44	Secondary Disability	VARCHAR 5	Yes	No		Elements	Quarterly	Yes		See Appendix 3 for valid disability types and Appendix 4 for valid sources
									Report the appropriate code value to indicate whether the	
									individual is classified by the agency as an individual with a	
									significant disability or a most significant disability.	
									If the individual is found not to have a disability, this item	
									should be coded 0;0.	
										1 = Individual has a significant disability
15	Significance of Disability	INT 1	No	No		Disability Data Elements	Quarterly	Yes	Leave blank if this element does not apply or if the individual exited as an applicant with Type of Exit (354) code 0.	2 = Individual is most significantly disabled 0 = Individual has no significant disability
45	Significance of Disability	1141 7	140	140		Lielliello	Quarterry	163	exted as an applicant with Type of Exit (354) code o.	0 - marviduar nas no significant disability
									Report the date that the individual's trial work experience	
									began.	
1									If the individual has been placed in more than one trial work	
1						Trial Work			experience, the first occurrence of trial work must end with	
	5 5 57 . 1	DATE	l.,	l		Experience Data		l,	an End Date of Trial Work Experience (Element 47) before	 
46	Start Date of Trial Work Experience	DATE	No	No		Elements Trial Work	Quarterly	Yes	another Start Date of Trial Work Experience can begin	YYYYMMDD
						Experience Data			Report the date that the individual's trial work experience	
47	End Date of Trial Work Experience	DATE	No	No		Elements	Quarterly	Yes	ended.	YYYYMMDD
1									Report the date on which the initial IPE was signed by both	
									the VR Counselor and the individual.	
1				l		Individualized Plan				
l <sub>xx</sub>	Date of Initial IPE	DATE	No	New element number		for Employment (IPE) Data Elements	Quarterly	No	The date must be verifiable through supporting documentation.	YYYYMMDD
100	Sace of findar in C	DAIL	.40	umpel		Li Data Liements	-cuarterry	,,,,		
1									This data element reports whether the eligible individual and	
1									counselor mutually agreed upon an extension (of time) for the development of the IPE within 90 days of the individual's	
1									eligibility determination for VR services.	
						Individualized Plan				
[	UDE DI			I		for Employment				1 = An agreed upon IPE development extension was completed
XX	IPE Development Extension	INT 1	No	New		(IPE) Data Elements	Quarterly	No	documentation.	0 = An agreed upon IPE development extension was not completed
						Individualized Plan				
1	Supported Employment Goal on Current		l	l		for Employment				1 = Individual has a supported employment goal on the current IPE
49	IPE	INT 1	INO	No		(IPE) Data Elements	Quarterly	Yes	the current IPE	0 = Individual does not have a supported employment goal on the current IPE

Element			Multiple Values					Updateable (Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report		Definitions or Instructions	Code Values
50	Employment at IPE	INT 2	No	No	400	Individualized Plan for Employment (IPE) Data Elements	Quartorly	No	Report the code value that best describes the employment status of the individual.	1 = Employed: Competitive Integrated Employment 2 = Employed: Self-Employment 3 = Employed: Randolph-Sheppard BEP 4 = Employed: State Agency Managed BEP 5 = Extended Employment 6 = Received Notice of Termination of Employment or Military Separation is pending 7 = Not Employed: Student in Secondary Education 8 = Not Employed: All other Students 9 = Not Employed: Trainee, Intern, or Volunteer 10 = Not employed: Other Students
30	Employment at IPE	IIVI Z	NO	INO	400	(IFL) Data Liellielits	Quarterry	NO		10 - Not employed. Other Reason
51	Primary Occupation at IPE	INT 6	No	Modified reporting instructions		Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	For an individual who is employed (Element 50, codes 1-6), enter the current 2018 Standard Occupational Classification (SOC) code that best describes the individual's occupation from which he/she derives the majority of their hourly earnings.	xxxxx
									Report individual's hourly wage (rounded to the nearest cent) earned at the time of the IPE.	
52	Hourly Wage at IPE	DECIMAL 5, 2	No	No		Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	Report 0 if individuals were not employed or had no earnings at the time of IPE.	XX.XX
						Individualized Plan			Report the number of hours the individual worked in a typical week at the time of the IPE.	
53	Hours Worked in a Week at IPE	INT 2	No	No		for Employment (IPE) Data Elements	Quarterly	No	Report 0 if individual was unemployed.	l <sub>xx</sub>
54	Adult	INT 1	No	Modified definition and list of choices	903	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	The purpose of the Adult program is to increase the employment, job retention, earnings, and career advancement of U.S. workers by providing quality employment and training services to assist eligible individuals in finding and qualifying for meaningful employment, and to help employers find the skilled workers they need to compete and succeed in business.	1 = Individual received services from the title I Adult program 0 = Individual did not receive services from the title I Adult program 9 = Participant did not self-identify
55	Adult Education	INT 1	No	Modified definition	910	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	The Adult Education program helps adults get the basic skills they need including reading, writing, math, English language proficiency, and problem-solving to be productive workers, family members, and citizens.	1 = Individual received Adult Education services (Title II of WIOA) 0 = Individual did not receive Adult Education services (Title II of WIOA) 9 = Participant did not self-identify
56	Dislocated Worker	INT 1	No	Modified definition and list of choices	904	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	The Dislocated Worker program provides employment and training services to assist workers who have been laid off or have been olified that they will be terminated or laid off in finding and qualifying for meaningful employment, and to help employers find the skilled workers they need to compete and succeed in business.	1 = Individual received services from the title I Dislocated Worker program 0 = Individual did not receive services from the title I Dislocated Worker program 9 = Participant did not self-identify
57	Job Corps	INT 1	No	Modified definition	911	Individualized Plan for Employment	Quarterly	No	Job Corps is a no-cost education and vocational training program administered by the U.S. Department of Labor that helps young people ages 16-24 improve the quality of their lives by empowering them to get great jobs and become independent.	1 = Individual received services from the Job Corps Program 0 = Individual did not receive services from the Job Corps Program 9 = Participant did not self-identify
58	Vocational Rehabilitation	INT 1	No	Modified reporting instructions	917	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	VR participants should be assigned code 1, unless they have also received services from the VR&E program.	1 = Individual received services from the vocational rehabilitation program 2 = Individual received services from the Department of Veterans Affairs Vocational Rehabilitation and Employment (VR&E) program 3 = Individual received services from both vocational rehabilitation and the Department of Veterans Affairs Vocational Rehabilitation and Employment (VR&E) programs 0 = Individual did not receive any services 9 = Participant did not self-identify

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									The Wagner-Peyser/Employment Services program focuses	
									on providing a variety of employment related labor exchange	
									services, including but not limited to job search assistance, job referral, and placement assistance for job seekers, re-	
									employment services to unemployment insurance claimants,	
									and recruitment services to employers with job openings.	
									Services are delivered in one of three modes including self-	
									service, facilitated self-help services, and staff assisted	
										1 = Individual received services from the title III Wagner-Peyser Employment Services
										program
				Modified		Individualized Plan for Employment				0 = Individual did not receive services from the title III Wagner-Peyser Employment Services program
59	Wagner-Peyser Employment Service	INT 1	No		918	(IPE) Data Elements	Ouarterly	No	appropriate, job search workshops, and referral to training, may be available.	9 = Participant did not self-identify
33	wagner reyser employment service		140	deminion	310	(ii E) Data Elements	quarterry	140	may be available.	3 - Turkelpane did not sen rachary
									The title I Youth program focuses on assisting out-of-school	
									youth and in-school youth with one or more barriers to	
									employment prepare for post-secondary education and	
				Modified definition and		Individualized Plan for Employment				1 = Individual received services from the title I Youth program 0 = Individual did not receive services from the title I Youth program
60	Youth	INT 1	No	list of choices		(IPE) Data Elements	Ouarterly	No		9 = Participant did not self-identify
00	Toutil	1141 1	NO	list of choices	903	(IFL) Data Liements	Quarterry	NO	career/promotional opportunities.	5 - Facticipant did not sen-identity
									Record the 14-character grant number if the individual	
									received services under the Youth Build program. The grant number should be entered in the following format without	
									dashes: Two alphabetic characters representing the grant	
									program code – five numeric characters – two numeric	
									characters representing the fiscal year when the grant was	
									awarded – two numeric characters identifying the type of	
									grant awarded – one alphabetic character identifying the	
									relevant agency at ETA – two numeric characters identifying	
									the State that received the grant was served under (e.g., AA- 12345-12-55-A-26).	
									12543-12- 55-A-26/.	
									If the individual is being served by the Youth Build program	
									and the grant number is unknown, enter all 9s.	
						Individualized Plan				
						for Employment		l	Leave blank if the individual did not receive services funded	
61	Youth Build	VARCHAR 14	No	No	919	(IPE) Data Elements	Quarterly	No	by Youth Build.	XXXXXXXXXXXXXXXX
						Individualized Plan			A participant who has been unemployed for 27 or more	1 = Individual meets the definition of Long-Term Unemployed
				Modified list		for Employment				0 = Individual does not meet the definition of Long-Term Unemployed
62	Long-Term Unemployed	INT 1	No	of choices	402		Quarterly	No	term unemployed.	9 = Participant did not self-identify
				NA - J15 - J 11 ·		Individualized Plan				1 = Individual is within two years of exhausting TANF
63	Exhausting TANF within 2 Years	INT 1	No	Modified list of choices	601	for Employment (IPE) Data Elements	Quarterly	No	eligibility under part A of Title IV of the Social Security Act at program entry.	0 = Individual is not within two years of exhausting TANF 9 = Participant did not self-identify
03	LAMAUSTING THINE MITTING TEALS	IIVI I	INO	or choices	001	(ir c) Data Elements	Quarterry	INO	program endy.	2 - Farticipant did not Sell-Identity
						Individualized Plan			Report only if the individual is between 14 and 24.	1 = Individual meets the definition of a Foster Care Youth
				Modified list		for Employment				0 = Individual does not meet the definition of a Foster Care Youth
64	Foster Care Youth	INT 1	No	of choices	704	(IPE) Data Elements	Quarterly	No	Leave blank if not applicable.	9 = Participant did not self-identify
64	Foster Care Youth	INT 1	No		704		Quarterly	No	Leave blank if not applicable.	

Flement			Multiple Values					Updateable (Y/N) after		
	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report		Definitions or Instructions	Code Values
									(a) Lacks a fixed, regular, and adequate nighttime residence;	
									(b) Has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, such as a car, park, abandoned building, bus or train station, airport, or camping ground;	
						Individualized Plan			(c) Is a migratory child who in the preceding 36 months was required to move from one school district to another due to changes in the parent's or parent's spouse's seasonal employment in agriculture, dairy, or fishing work; or (d) Is under 18 years of age and absents himself or herself	1 = Individual meets the definition of Homeless
65	Homeless Individual, Homeless Children and Youths, or Runaway Youth	INT 1	No	Modified list of choices	800	for Employment	Quarterly	No	from home or place of legal residence without the permission of his or her family (i.e., runaway youth).	9 = Participant did not self-identify
66	Ex-Offender	INT 1	No	No	801	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	A person who either (a) has been subject to any stage of the criminal justice process for committing a status offense or delinquent act, or (b) requires assistance in overcoming barriers to employment resulting from a record of arrest or conviction.	1 = The individual meets the definition of an Ex-Offender 0 = The individual does not meet the definition of an Ex-Offender 9 = Participant did not self-identify
									(a) Receives, or in the six months prior to application to the program has received, or is a member of a family that is receiving or in the past six months prior to application to the	
									program has received public assistance (SNAP, TANF, SSI, other State/local assistance); (b) Is in a family with total family income that does not exceed the higher of the poverty line or 70% of the lower living standard income level;	
									(c) Is a youth who receives or is eligible to receive a free or reduced price lunch (d) Is a foster child on behalf of whom State or local government payments are made; (e) Is an participant with a disability whose own income is	
67	Low Income	INT 1	No	Modified list	802	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	(f) Is an inparticipant with a disability whose with the poverty line but who is a member of a family whose income does not meet this requirement;  (f) Is a homeless participant or a homeless child or youth or runaway youth (see Data Element #700); or  (g) Is a youth living in a high-poverty area.	1 = Individual meets the definition of Low Income 0 = Individual does not meet the definition of Low Income 9 = Participant did not self-identify
67	Low income	INII	NO	of choices	802	(IPE) Data Elements	Quarterly	NO	(g) is a youth living in a nign-poverty area.	9 = Participant did not sell-identify
60		INT 1		Modified list		Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	A person who has limited ability in speaking, reading, writing, or understanding the English language and also meets at least one of the following two conditions: (a) his or her native language is a language other than English, or (b) he or she lives in a family or community environment where	1 = Individual meets the definition of English Language Learner 0 = Individual does not meet the definition of English Language Learner 9 = Participant did not self-identify
68	English Language Learner	INII	NO	of choices	803	(IPE) Data Elements	Quarterly	No	a language other than English is the dominant language.  A) a youth, who has English reading, writing, or computing skills at or below the 8th grade level on a generally accepted standardized test; or	9 = Participant did not sen-identity
69	Basic Skills Deficient/Low Levels of Literacy	INT 1	No	Modified list of choices	804	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	B) a youth or adult who is unable to compute and solve problems, or read, write, or speak English at a level necessary to function on the job, in the participant's family, or in society.	I = Individual meets the definition of Basic Skills Deficient/Low Levels of Literacy     Individual does not meet the definition of Basic Skills Deficient/Low Levels of     Literacy     Participant did not self-identify
70	Cultural Barriers	INT 1	No	No	805	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	An individual who perceives him or herself as possessing attitudes, beliefs, customs, or practices that influence a way of thinking, acting, or working that may serve as a hindrance to employment.	1 = Individual meets the definition of Cultural Barriers 0 = Individual does not meet the definition of Cultural Barriers 9 = Participant did not self-identify
71	Single Parent	INT 1	No	No	806	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	An individual who is single, separated, divorced, or a widowed individual who has primary responsibility for one or more dependent children under age 18 (including single pregnant women).	1 = Individual meets the definition of a Single Parent 0 = Individual does not meet the definition of a Single Parent 9 = Participant did not self-identify

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
						Individualized Plan			An individual who has been providing unpaid services to family members in the home and who:  (A)(i) has been dependent on the income of another family member but is no longer supported by that income; or (ii) is the dependent spouse of a member of the Armed Forces on active duty and whose family income is significantly reduced because of a deployment, a call or order to active duty, a permanent change of station, or the service-connected death or disability of the member; and	1 = Individual meets the definition of a Displaced Homemaker 0 =
72	Displaced Homemaker	INT 1	No	Modified list of choices	807	for Employment (IPE) Data Elements	Quarterly	No	(B) is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.	Individual does not meet definition of a Displaced Homemaker 9 = Participant did not self-identify
73	Migrant and Seasonal Farmworker	INT 1	No	Modified list of choices	808	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No		1 = Individual is a low-income individual (i) who for 12 consecutive months out of the 24 months prior to application for the program involved, has been primarily employed in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment; and (ii) faces multiple barriers to economic self-sufficiency 2 = Individual is a seasonal farmworker whose agricultural labor requires travel to a job site such that the farmworker is unable to return to a permanent place of residence within the same day 3 = Individual is a dependent of the individual described as a seasonal or migrant seasonal farmworker above 0 = Individual does not meet any of the migrant or seasonal farmworker conditions listed above 9 = Participant did not self-identify
	State Definition for Age of Students with					Individualized Plan for Employment			Record the two-digit lower limit for the age of the students with disabilities followed by a semicolon and then the two-	
74	Disabilities	VARCHAR 5	Yes	No		(IPE) Data Elements	Quarterly	No	digit upper limit for the age of the students with disabilities.	XX;XX
77	Highest Elementary or Secondary School Grade Completed at Program Entry	INT 2	No	Modified element title	407	Individualized Plan for Employment (IPE) Data Elements	Quarterly	No	Use the appropriate code to report the highest school grade completed by the individual.  Report 1-12 for the number of the highest school grade completed by the individual.	xx
78	Enrolled in Secondary Education	INT 1	No	No	1401	Individualized Plan for Employment (IPE) Data Elements	Quarterly	Yes	This data element is reported if the individual was either already enrolled in secondary education at the time of program entry or became enrolled in a secondary education program at the 9th grade level at any point while participating in the program.	1 = Individual is enrolled in a secondary education program at or above the 9th grade level and achieving a secondary school diploma or its recognized equivalent high school diploma is as a goal on their IPE 2 = Individual is enrolled in a secondary education program at or above the 9th grade level and achieving a secondary school diploma or its recognized equivalent high school diploma is not a goal on their IPE 0 = Individual is not enrolled in a secondary education program at or above the 9th grade level
xx	Enrolled in a Recognized Secondary School Equivalency Program	INT 1	No	New element number		Individualized Plan for Employment	Quarterly	Yes	This data element is reported if the individual was either already enrolled in a recognized secondary equivalency	1 = Individual is enrolled in a recognized secondary equivalency program at or above the 9th grade level  0 = Individual is not enrolled in a recognized secondary equivalency program at or above the 9th grade level
	Date Received Special Education					Individualized Plan for Employment	·		Report the date the individual attained a special education certificate of completion. Update as needed.  Leave blank if individual did not attain a special education	
79	Certificate of Completion	DATE	No	No		(IPE) Data Elements	Quarterly	Yes	certificate of completion.  Report the date the individual completed secondary education and attained a secondary school diploma. Update as needed.	YYYYMMDD
						Individualized Plan for Employment			The date must be verifiable through supporting documentation if earned during program participation.  Leave blank if the individual did not attain a secondary	
81	Date Attained Secondary School Diploma	DATE	No	No		(IPE) Data Elements	Quarterly	Yes	school diploma.	YYYYMMDD

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Report the date the individual attained recognized secondary school equivalency. Update as needed.	
									secondary school equivalency. Opdate as needed.	
									The date must be verifiable through supporting	
						Individualized Plan			documentation if earned during program participation.	
	Date Attained Recognized Secondary			Modified		for Employment			Leave blank if individual did not attain a recognized	
82	School Equivalency	DATE	No	element title		(IPE) Data Elements	Quarterly	Yes	secondary school equivalency.	YYYYMMDD
						Individualized Plan				1 = Individual is in a postsecondary education program that leads to a credential or degree from an accredited institution or program 2 = Individual is enrolled in a career or technical training program that leads to a recognized postsecondary credential 3 = Individual is enrolled in a career or technical training program that does not lead to a recognized postsecondary credential 0 = Individual is not enrolled in a postsecondary education program that leads to a
84	Enrolled in Postsecondary Education or career or technical training	INT 1	No	Modified list of choices	1332	for Employment (IPE) Data Elements	Quarterly	Yes	Report if the individual is enrolled in a postsecondary education or career or technical training program.	credential or degree from an accredited institution or career or in a technical training program
04	career or technical training	1141 1	INO	or choices	1332	(IF E) Data Elements	Quarterly	163	education of career of technical training program.	program
									Report the date the participant was enrolled during program participation in an education or training program that leads to a recognized postsecondary credential or employment as defined by the core program in which the participant participates. Agencies may use this coding value if the individual was either already enrolled in education or training at the time of the initial IPE or became enrolled in education or training at any point while participating in the program.	
	Date Enrolled During Program Participation in an Education or Training					Individualized Plan			This data element applies to the MSG indicator and will be used to calculate the denominator.	
0.5	Program Leading to a Recognized	0.475	<b> </b>			for Employment		,	Leave blank if the data element does not apply to the	NAME AND DESCRIPTION OF THE PROPERTY OF THE PR
85	Postsecondary Credential or Employment	DATE	No	No	1811	(IPE) Data Elements	Quarterly	Yes	individual.	YYYYMMDD  1 = Individual has completed some postsecondary education but, has no degree or
						Individualized Plan				certificate
	Completed Some Postsecondary					for Employment				0 = Individual has not completed some postsecondary education and has no degree or
86	Education, No Degree or Certificate	INT 1	No	No		(IPE) Data Elements	Quarterly	Yes	individual.	certificate
87	Date Attained Associate Degree	DATE	No	No		Individualized Plan for Employment (IPE) Data Elements	Quarterly	Yes	Report the date the Associate Degree was attained.  The date must be verifiable through supporting documentation if earned during program participation.  Leave blank if an Associate Degree was not attained.	YYYYMMDD
87	Date Attained Associate Degree	DATE	INO	INO		(IFE) Data Elements	Quarterry	163	Leave Dialik II ali Associate Degree was not attained.	TTTTWIND
00		DATE	No.			Individualized Plan	Outstall	Vec	Report the date the Bachelor's Degree was attained.  The date must be verifiable through supporting documentation if earned during program participation.	
88	Date Attained Bachelor's Degree	DATE	No	No		(IPE) Data Elements	Quarterly	Yes	Leave blank if a Bachelor's Degree was not attained.	YYYYMMDD
						Individualized Plan for Employment			Report the date the Master's Degree was attained.  The date must be verifiable through supporting documentation if earned during program participation.	
89	Date Attained Master's Degree	DATE	No	No	1814	(IPE) Data Elements	Quarterly	Yes	Leave blank if a Master's Degree was not attained.	YYYYMMDD

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Report the date the Graduate Degree was attained.	
									Report a Master's Degree only in Element 89.	
									The date must be verifiable through supporting	
						Individualized Plan			documentation if earned during program participation.	
90	Date Attained Graduate Degree	DATE	No	No	1814	for Employment (IPE) Data Elements	Quarterly	Yes	Leave blank if a Graduate Degree was not attained.	YYYYMMDD
30	Date Accounted Graduate Degree	57172	110		1011	(ii z) bata ziements	quarterry	103	•	
									Report the date the Vocational/Technical License was attained.	
									attailled.	
									The date must be verifiable through supporting	
						Individualized Plan			documentation if earned during program participation.	
	Date Attained Vocational/Technical					for Employment			Leave blank if a Vocational/Technical License was not	
93	License	DATE	No	No		(IPE) Data Elements	Quarterly	Yes	attained.	YYYYMMDD
									Report the date the Vocational/Training Certificate or	
									Certification was attained.	
									The date must be verifiable through supporting	
									documentation if earned during program participation.	
						Individualized Plan				
94	Date Attained Vocational/Technical Certificate or Certification	DATE	No	No		for Employment (IPE) Data Elements	Quarterly	Yes	Leave blank if a Vocational/Training Certificate or Certification was not attained.	YYYYMMDD
		57172	1.10			(ii z) bata ziemente	Quarterry	100		
									Report the date on which the individual attained some other form of recognized credential.	
									Torri or recognized credential.	
									The date must be verifiable through supporting	
						Individualized Plan			documentation if earned during program participation.	
				Modified		for Employment			Leave blank if the individual did not attain some other form	
95	Date AttainedOther Recognized Credential	DATE	No	element title		(IPE) Data Elements	Quarterly	Yes	of recognized credential.	YYYYMMDD
						Pre-Employment				
	Start Date of Pre-Employment Transition					Transition Services			Report the date that the individual received the first pre-	
96	Services	DATE	No	No		Data Elements		No	employment transition service.	YYYYMMDD
						Pre-Employment			Report at the time the service is provided.	
97	Job Exploration Counseling, Service Provided by VR Agency Staff	INT 1	No	No		Transition Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
97	Provided by VK Agency Staff	INII	INO	NO		Data Elements	Occurrence	res	Report at the time the service is provided.	1 = service was provided in whole or part by VR agency staff
						Pre-Employment			neport at the time the service is provided.	
	Job Exploration Counseling, Service		l			Transition Services	Upon		Leave blank if service was not provided through VR agency	<u> </u>
98	Provided through VR Agency Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	purchase.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider Type must be reported. Report the code value that best	
									describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
						Pre-Employment				2 = Private CRP
99	Job Exploration Counseling, Purchased Service Provider Type	INT 1	No	No		Transition Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	3 = Other Public Service Provider 4 = Other Private Service Provider
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	1							
									If the service was purchased by the agency, report the actual	
	Job Exploration Counseling, VR Program			Modified reporting		Pre-Employment Transition Services	Upon		or average cost of a Job Exploration Counseling service.	
100	Expenditure for Purchased Service	INT 6	No	instructions		Data Elements	Occurrence	Yes	Report at the time the expenditure is paid.	xxxxx
						B				
	Work Based Learning Experience, Service					Pre-Employment Transition Services	Upon		Report at the time the service is provided.	
103	Provided by VR Agency Staff	INT 1	No	No		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Report at the time the service is provided.	
	Work Based Learning Experience, Service					Pre-Employment Transition Services	Upon		Leave blank if service was not provided through VR agency	
104		INT 1	No	No			Occurrence	Yes	purchase.	1 = Service was provided in whole or part through purchase by the VR agency
		-	•	•						

			Multiple					Updateable		
Element Number	51 N	Data Tara	Values Allowed	Change	PIRL Element		D	(Y/N) after	D. C. W	Code Values
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
	Work Based Learning Experience,					Pre-Employment Transition Services	Upon		Leave blank if service was not provided through purchase by	2 = Private CRP
105	Purchased Service Provider Type	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	4 = Other Private Service Provider
	Work Based Learning Experience, VR			Modified		Pre-Employment			If the service was purchased by the agency, report the actual	
106	Program Expenditure for Purchased Service	INT 6	No	reporting instructions		Transition Services Data Elements	Upon Occurrence	Yes	or average cost of a Work-Based Learning Experience service.	xxxxxx
106	Service	INTO	INO	instructions		Data cienients	Occurrence	res	service.	,,,,,,,,
						Pre-Employment			Report at the time the service is provided.	
	Counseling on Enrollment Opportunities,					Transition Services	Upon			
109	Service Provided by VR Agency Staff	INT 1	No	No		Data Elements	Occurrence	Yes		1 = Service was provided in whole or part by VR agency staff
	5					D			Report at the time the service is provided.	
	Counseling on Enrollment Opportunities, Service Provided through VR Agency		1		1	Pre-Employment Transition Services	Upon	1	Leave blank if service was not provided through VR agency	
110	Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	purchase.	1 = Service was provided in whole or part through purchase by the VR agency
			1						If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider Type must be reported. Report the code value that best	
									describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
						Pre-Employment				2 = Private CRP
	Counseling on Enrollment Opportunities,	l				Transition Services	Upon		Leave blank if service was not provided through purchase by	
111	Purchased Service Provider Type	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
									If the service was purchased by the agency, report the actual or average cost of a Counseling on Enrollment Opportunities	
	Counseling on Enrollment Opportunities,			Modified		Pre-Employment			service.	
	VR Program Expenditure for Purchased			reporting		Transition Services	Upon			
112	Service	INT 6	No	instructions		Data Elements	Occurrence	Yes	Report at the time the expenditure is paid.	XXXXXX
						Dec Francisco			Report at the time the service is provided.	
	Workplace Readiness Training, Service					Pre-Employment Transition Services	Upon		Report at the time the service is provided.	
115	Provided by VR Agency Staff	INT 1	No	No		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Report at the time the service is provided.	
	Workplace Readiness Training, Service					Pre-Employment Transition Services	Upon		Leave blank if service was not provided through VR agency	
116	Provided through VR Agency Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	purchase.	1 = Service was provided in whole or part through purchase by the VR agency
	,									
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider Type must be reported. Report the code value that best	
									describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
						Pre-Employment				2 = Private CRP
	Workplace Readiness Training, Purchased					Transition Services	Upon		Leave blank if service was not provided through purchase by	
117	Service Provider Type	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
			1						If the service was purchased by the agency, report the actual	
	Workplace Readiness Training, VR			Modified		Pre-Employment			or average cost of a Workplace Readiness Training service.	
	Program Expenditure for Purchased			reporting		Transition Services	Upon			
118	Service	INT 6	No	instructions		Data Elements	Occurrence	Yes	Report at the time the expenditure is paid.	xxxxxx
			1			Pre-Employment			Report at the time the service is provided.	
	Instruction in Self Advocacy, Service					Transition Services	Upon		neport at the time the service is provided.	
121	Provided by VR Agency Staff	INT 1	No	No		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Report at the time the service is provided.	
			1		1	Pre-Employment	1	1		
1,22	Instruction in Self Advocacy, Service	INT 1	No	No.		Transition Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through VR agency	1 - Carrier was remaided in what are mark through a washes by the VO
122	Provided through VR Agency Purchase	IINI I	INO	No		Data Elements	Occurrence	162	purchase.	1 = Service was provided in whole or part through purchase by the VR agency
			1						If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
			1		1		1	1	Type must be reported. Report the code value that best	1 - Dublic Community Debubility in December (CDD)
			1		1	Pre-Employment	1	1	describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
	Instruction in Self Advocacy, Purchased		1			Transition Services	Upon		Leave blank if service was not provided through purchase by	3 =Other Public Service Provider
123	Service Provider Type	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider

			Multiple					Updateable		
Element Number	Element Name	Data Type	Values Allowed	Change	PIRL Element	Report at	Report	(Y/N) after	Definitions or Instructions	Code Values
Number	Liement Name	Data Type	Allowed	change	r itte Element	пероптат	пероп	midarreporting		code values
				Modified		Pre-Employment			If the service was purchased by the agency, report the actual or average cost of an Instruction in Self Advocacy service.	
	Instruction in Self Advocacy, VR Program			reporting		Transition Services	Upon		of average cost of all instruction in sen Advocacy service.	
124	Expenditure for Purchased Service	INT 6	No	instructions		Data Elements		Yes	Report at the time the expenditure is paid.	XXXXXX
									Report the date that all Pre-Employment Transition Services	
						Pre-Employment			were discontinued.	
	Date all Pre-Employment Transition					Transition Services	Upon		Leave blank if the individual did not receive Pre-Employment	
XX	Services were discontinued	DATE	No	New		Data Elements	Occurrence	No	Transition Services.	YYYYMMDD
									Report the date on which the initial VR service began or after the IPE for the individual became effective.	
									Leave blank if the individual has not received an initial VR service after the IPE for the individual became effective.	
									service after the IFE for the individual became effective.	
127	Start Date of Initial VR Service on or after IPE	DATE	<b>.</b>	No	000	VR and SE Service	Upon	No	The date must be verifiable through supporting	VOOVAAAADD
127	IPE	DATE	No	No	900	Data Elements	Occurrence	NO	documentation.  Career services refer to the services described in WIOA Sec	YYYYMMDD
									134(c)(2)(A)(xii). For VR purposes, these services are the	
									ones identified in Elements (X-X)	
									This date must occur after the Start Sate of Initial VR Services	
									on or after IPE (element 127).	
128	Date of Most Recent Career Service	DATE	No	No	1004	VR and SE Service Data Elements	Upon Occurrence	Yes	Leave blank if this element does not apply	YYYYMMDD
128	Date of Most Recent Career Service	DATE	INO	INO	1004	Data Elements	Occurrence	tes		TTTTMINIDU
									Full-time or part-time academic training leading to a degree	
									recognized as beyond a Baccalaureate Degree, such as a Master of Science, Arts (M.S. or M.A.) or Doctor of	
									Philosophy (Ph.D.)	
									Report at the time the service is provided.	
130	Graduate College or University, Service Provided through VR Agency Purchase	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
130	Provided dirough VN Agency Furchase	IIVI I	INO	INO		Data Elements	Occurrence	ies	viv agency.	1 - Service was provided in whole of part unough purchase by the vivagency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider Type must be reported. For each service category, report the	
										1 = Public Community Rehabilitation Program (CRP)
										2 = Private CRP
131	Graduate College or University, Purchased Service Provider Type	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	3 =Other Public Service Provider 4 =Other Private Service Provider
			1	1				-		
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
	Graduate College or University, Amount					Training Services	Upon		Leave blank if service was not provided through purchase by	
132	of VR Title I Funds Expended	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	xxxxxx
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in their IPEs and have already been placed in an employment	
									setting.	
									Danast at the time the overenditure is noted	
									Report at the time the expenditure is paid.	
	Graduate College or University, Amount		I			Training Services	Upon		Leave blank if service was not provided through purchase by	
133	of SE Title VI Funds Expended	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	xxxxxx

			Multiple					Updateable		
Element Number Ele	ement Name		Values Allowed	Change	PIRL Element	Report at	Report	(Y/N) after	Definitions or Instructions	Code Values
	aduate College or University, Service	Data Type	Allowed	Change	FIRE Element	Report at	кероп	mittai reporting	Definitions of histractions	Code values
	ovided by Comparable Services and					Training Services	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
134 Ber	nefits Providers	NT 1	No	No		Data Elements	Occurrence	Yes	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.	
	raduate College or University, omparable Service Provider Type	VARCHAR 8	Yes	Modified list of choices			Upon Occurrence	Yes	Leave blank if service was not provided by a comparable service or benefit	See Appendix 5 for a list of comparable benefits providers
									Full-time or part-time academic training leading to a baccalaureate degree, a certificate, or other recognized less than postgraduate educational credential. Such training may be provided by a four-year college or university or technical college.	
	ur-Year College or University Training,								Report at the time the service is provided.	
	rvice Provided through VR Agency Irchase	NT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through purchase by the VR agency, the Purchased Service Provider Type must be reported. For each service category, report the code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
	ur-Year College or University Training, Irchased Service Provider Type	NT 1	No	No			Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	3 =Other Public Service Provider 4 =Other Private Service Provider
Fou Am	ur-Year College or University Training, nount of VR Funds Expended for Service	NT 6	No	No		Training Services Data Elements	Upon Occurrence	Yes	Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.  Report at the time the expenditure is paid.  Leave blank if service was not provided through purchase by VR agency.	хооооох
Fou	ur-Year College or University Training,	INT 6	No	NO			occurrence	Tes	Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.  Report at the time the expenditure is paid.	^^^^
	mount of SE Funds Expended for Service		l				Upon		Leave blank if service was not provided through purchase by	
140 (Tit	itle VI)	NT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	XXXXXX
Fou	ur-Year College or University Training,									
Ser	rvice Provided by Comparable Services		l			Training Services	Upon			1 = Service was provided in whole or part by comparable services and benefits
	d Benefits Providers	NT 1	No	No		Data Elements	Occurrence	Yes	services and benefits providers.  Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.	providers
	omparable Services and Benefits			Modified list		Training Services	Upon		Leave blank if service was not provided by a comparable	
		VARCHAR 8	Yes	of choices				Yes		See Appendix 5 for a list of comparable benefits providers

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Full-time or part-time academic training above the	
									secondary school level leading to an Associate's Degree, a certificate, or other recognized educational credential. Such	
									training is provided by a community college, junior college,	
									or technical college.	
									or technical conege.	
									Report at the time the service is provided.	
	Junior or Community College Training,								report at the time the service is provided.	
	Service Provided through VR Agency					Training Services	Upon		Leave blank if service was not provided through purchase by	
144	Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	4 0 15 0 3 0 1 150 5 0 (600)
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
	Junior or Community College Training,					Training Services	l		Lance black if any income and any ideal shape of a contract to	2 = Private CRP 3 =Other Public Service Provider
145		INT 1	No	No		Data Elements	Upon Occurrence	Vos	Leave blank if service was not provided through purchase by VR agency.	4 =Other Public Service Provider
145	Purchased Service Provider Type	INIII	INO	NO		Data Elements	Occurrence	res	VK agelicy.	4 = Other Private Service Provider
									Report the quarterly VR program expenditures for the	
							l		purchased service. Expenditures may include non-Federal	
							1		share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									include uniquidated obligations of electribrances.	
									Report at the time the expenditure is paid.	
	Junior or Community College Training,								report at the time the expenditure is paid.	
	Amount of VR Funds Expended for Service					Training Services	Upon		Leave blank if service was not provided through purchase by	
146	(Title I)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	xxxxxx
2.0	(mac i)		110	1,0		Data Elements	occurrence	100	vir agency.	700000
									Report the quarterly Supported Employment Services	
							1		program expenditures for the purchased service. Recipients	
							1		of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
	Junior or Community College Training,									
	Amount of SE Funds Expended for Service					Training Services	Upon		Leave blank if service was not provided through purchase by	
147	(Title VI)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	xxxxxx
	Junior or Community College Training						l			
	Service Provided by Comparable Services	1	1			Training Services	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
148	and Benefits Providers	INT 1	No	No		Data Elements	Occurrence	Yes	services and benefits providers.	providers
		1	1				1			
							l		Report up to three codes, separated by semicolons, that best	
		1	1				1		describes the service providers who provided the individual	
		1	1				1		with a comparable service or benefit.	
	lunios as Cammunity C-U Tii	1	1				1			
	Junior or Community College Training,	1	1	Modified list		Training Consiss-	L		Leave blank if consist was not provided by a co	
149	Comparable Services and Benefits Provider Type	VARCHAR 8	Yes	of choices		Training Services Data Elements	Upon Occurrence	Vos	Leave blank if service was not provided by a comparable service or benefit	See Appendix 5 for a list of comparable benefits providers
143	riovidei Type	VANCHANO	162	or critices		Data Elellielits	Occurrence	163	service or perietit	See Appendix 5 for a list of comparable benefits providers
							l			
		l		1	1	l	l		Occupational, vocational, or job skill training provided by a	
			1		1		1		community college and/or business, vocational/trade or	
							l		technical school to prepare students for gainful employment	
							l		in a recognized occupation, not leading to an academic	
		1	1				1		degree.	
		1	1				1		acg. cc.	
	Occupational or Vocational Training,								Report at the time the service is provided.	
	Service Provided by VR Agency Staff (in-					Training Services	Upon		napore at the time the service is provided.	
		INT 1	No	No		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
	,									,

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Occupational, vocational, or job skill training provided by a	
									community college and/or business, vocational/trade or	
									technical school to prepare students for gainful employment	
									in a recognized occupation, not leading to an academic	
									degree.	
									Report at the time the service is provided.	
	Occupational or Vocational Training,								Report at the time the service is provided.	
	Service Provided through VR Agency					Training Services	Upon		Leave blank if service was not provided through purchase by	
151	Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	A DIVING TO DISTRICT DE COMP
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
	Occupational or Vocational Training,					Training Services	Upon		Leave blank if service was not provided through purchase by	
152	Purchased Service Provider Type	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
					1					
					1				Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
	Committee of the Victorian I Torinian								Report at the time the expenditure is paid.	
	Occupational or Vocational Training, Amount of VR Funds Expended for Service					Training Services	Upon		Leave blank if service was not provided through purchase by	
153	(Title I)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	lxxxxxx l
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
	Occupational or Vocational Training, Amount of SE Funds Expended for Service					Training Services	Upon		Leave blank if service was not provided through purchase by	
154	(Title VI)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	xxxxxx
									,	
	Occupational or Vocational Training,									
455	Service Provided by Comparable Services		l			Training Services	Upon	v		1 = Service was provided in whole or part by comparable services and benefits
155	and Benefits Providers	INT 1	No	No		Data Elements	Occurrence	Yes	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Occupational or Vocational Training, Comparable Services and Benefits			Modified list		Training Services			Leave blank if service was not provided by a comparable	
156	Provider Type	VARCHAR 8	Yes	of choices		Data Elements	Upon Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
150	Trovider Type	VALLETIALLO	103	or choices		Data Elements	Occurrence	103	Service of Benefit	See Appendix 5 for a fixe of comparable betterits providers
					1				Training in specific job skills by a prospective employer.	
					1				Generally, the trainee is paid during this training.	
					1				Report at the time the service is provided.	
	On The Job Training, Service Provided by				1	Training Services	Upon			
157	VR Agency Staff (in-house)	INT 1	No	No		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Table 1 to a self- to be defined.	
					1				Training in specific job skills by a prospective employer. Generally, the trainee is paid during this training.	
					1				ocherony, the trainee is paid during this training.	
					1				Report at the time the service is provided.	
					1					
1	On The Job Training, Service Provided		l.,	L.	1		Upon		Leave blank if service was not provided through purchase by	[
158	through VR Agency Purchase	INT 1	INO	No	L	Data Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
	On The Job Training, Purchased Service Provider Type	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	If the service was provided in whole or part through purchase by the VR agency, the Purchased Service Provider Type must be reported. For each service category, report the code value that best describes the primary service provider.  Leave blank if service was not provided through purchase by VR agency.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP 3 =Other Public Service Provider 4 = Other Private Service Provider
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.  Report at the time the expenditure is paid.	
	On The Job Training, Amount of VR Funds Expended for Service (Title I)	INT 6	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxxx
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.  Report at the time the expenditure is paid.	
	On The Job Training, Amount of SE Funds					Training Services	Unan		Leave blank if service was not provided through purchase by	
161	Expended for Service (Title VI)	INT 6	No	No		Data Elements	Upon Occurrence	Yes	VR agency.	xxxxxx
	On The Job Training, Service Provided by Comparable Services and Benefits Providers	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by comparable services and benefits providers.	1 = Service was provided in whole or part by comparable services and benefits providers
	On The Job Training, Comparable Services			Modified list		Training Services	Upon		Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.  Leave blank if service was not provided by a comparable	
163	and Benefits Provider Type	VARCHAR 8	Yes	of choices		Data Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									A work-based employment and training program that combines hands-on, on-the-job work experience in a skilled occupation with related classroom instruction. Structured apprenticeship programs generally have minimum requirements for the duration of on-the job work experience, classroom instruction, and provide a recognized certificate of completion.	
	Registered Apprenticeship Training, Service Provided through VR Agency					Training Services	Upon		Report at the time the service is provided.	
		INT 1	No	No		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									A work-based employment and training program that combines hands-on, on-the-job work experience in a skilled occupation with related classroom instruction. Structured apprenticeship programs generally have minimum requirements for the duration of on-the job work experience, classroom instruction, and provide a recognized certificate of completion.  Report at the time the service is provided.	
	Registered Apprenticeship Training, Purchased Service Provider Type	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	1 = Service was provided in whole or part through purchase by the VR agency

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report		Definitions or Instructions	Code Values
reamber	Element value	Data Type	Allowed	change	T INC Element	перогене	пероп	micial reporting	Definitions of instructions	Educ Fundes
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	1 = Public Community Rehabilitation Program (CRP)
	Registered Apprenticeship Training,									2 = Private CRP
	Amount of VR Funds Expended for Service					Training Services	Upon		Leave blank if service was not provided through purchase by	3 =Other Public Service Provider
166	(Title I)	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									L	
									Report at the time the expenditure is paid.	
	Registered Apprenticeship Training,		1	1	1	L	l		l	
1	Amount of SE Funds Expended for Service					Training Services	Upon		Leave blank if service was not provided through purchase by	
167	(Title VI)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	XXXXXX
	Registered Apprenticeship Training, Service Provided by Comparable Services					Training Consises	Upon		Leave blank if samisa was not provided by samparable	1 - Cornice was provided in whole or part by comparable cornices and benefits
168	and Benefits Providers	INT 1	No	No		Training Services Data Elements	Occurrence	Yes	Leave blank if service was not provided by comparable services and benefits providers.	1 = Service was provided in whole or part by comparable services and benefits providers
168	and Benefits Providers	INIII	NO	NO		Data Elements	Occurrence	res	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Registered Apprenticeship Training,									
	Comparable Services and Benefits			Modified list		Training Services	Upon		Leave blank if service was not provided by a comparable	
169	Provider Type	VARCHAR 8	Yes	of choices				Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
			1.00							
									Includes apprenticeships, internships, short-term	
									employment, and other work-based learning experiences	
									not elsewhere classified. These opportunities are provided in	
									an integrated environment in the community to the	
									maximum extent possible and may be paid or unpaid.	
									Report registered apprenticeships in data elements 164-169	
									and on the job training in data elements 158-163.	
			1	1	I				Report these services through data elements	
	Apprenticeships and Work Based Learning		1	1	1					
	Experience, Service Provided through VR		1	1	I		Upon			
XX	Agency Purchase	INT 1	No	New		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
				1	1					
			1	1	I				Includes apprenticeships, internships, short-term	
			1	1	I					
			1	1	I				employment, and other work-based learning experiences	
			1	1	I				not elsewhere classified. These opportunities are provided in an integrated environment in the community to the	
			1	1	1				maximum extent possible and may be paid or unpaid.	
			1	1	1				maximum extent possible and may be paid of unpaid.	
			1	1	I					
			1	1	I				Danast sasistavad annuantiassi in il des element da da	
			1	1	1				Report registered apprenticeships in data elements 164-169	
			1	1	1				and on the job training in elements 158-163.	
			1	1	1				B	
	Annual to the second to the se			1	1				Report at the time the service is provided.	
	Apprenticeships and Work Based Learning			1	1	T				
	Experience, Service Provided through VR		I	l.,	1	Training Services	Upon	L.	Leave blank if service was not provided through purchase by	L
Ivx	Agency Purchase	INT 1	No	New		Data Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
	Apprenticeship Training, Purchased					Training Services	Upon		Leave blank if service was not provided through purchase by	
l <sub>xx</sub>	Service Provider Type	INT 1	No	New				Yes	VR agency.	4 =Other Private Service Provider
,,,,										
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.	
									include diniquidated obligations of effectivitiances.	
									Report at the time the expenditure is paid.	
	Apprenticeship Training, Amount of VR					Training Services	Upon		Leave blank if service was not provided through purchase by	
XX	Funds Expended for Service (Title I)	INT 1	No	New		Data Elements	Occurrence	Yes	VR agency.	XXXXXX
1	1		1	1	1				Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
	Apprenticeship Training, Amount of SE					Training Services			Leave blank if service was not provided through purchase by	
l <sub>xx</sub>	Funds Expended for Service (Title VI)	INT 6	No	New		Data Elements	Upon Occurrence	Yes	VR agency.	xxxxxx
700	Apprenticeship Training, Service Provided		110			Data Elements	Occurrence	100	vir agency.	700000
	by Comparable Services and Benefits					Training Services	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
xx	Providers	INT 1	No	New		Data Elements	Occurrence	Yes	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Apprenticeship Training, Comparable			Modified list		Training Services	Upon		Leave blank if service was not provided by a comparable	
xx	Services and Benefits Provider Type	VARCHAR 8	Yes	of choices		Data Elements		Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
	·									·
									Literacy training or training provided to remediate basic	
									academic skills that are needed to function on the job in the competitive labor market.	
									competitive labor market.	
	Basic Academic Remedial or Literacy								Report at the time the service is provided.	
	Training, Service Provided by VR Agency					Training Services	Upon		,	
170	Staff (in-house)	INT 1	No	No		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Literacy training or training provided to remediate basic academic skills that are needed to function on the job in the	
									competitive labor market.	
1	1		1	1	1				compensate labor market.	
1	1		1	1	1				Report at the time the service is provided.	
	Basic Academic Remedial or Literacy								, ·	
	Training, Service Provided through VR					Training Services	Upon		Leave blank if service was not provided through purchase by	
171	Agency Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
1	1		1	1	1				If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
1	1		1	1	1				code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
1	Basic Academic Remedial or Literacy		1	1	1	Training Services	Upon		Leave blank if service was not provided through purchase by	2 = Private CRP 3 = Other Public Service Provider
172	Training, Purchased Service Provider Type	INT 1	No	No	1	Data Elements	Occurrence	Yes		4 =Other Private Service Provider
				•	•			1	<u> </u>	

			Multiple					Updateable		
Element	El	Data Tara	Values	Ch	DIDLES			(Y/N) after	D. C. W	Code Values
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions  Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.	Code Values
	Basic Academic Remedial or Literacy Training, Amount of VR Funds Expended					Training Services	Upon		Report at the time the expenditure is paid.  Leave blank if service was not provided through purchase by	
173	for Service (Title I)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	xxxxxx
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.	
									Report at the time the expenditure is paid.	
	Basic Academic Remedial or Literacy Training, Amount of SE Funds Expended					Training Services	Upon		Leave blank if service was not provided through purchase by	
174	for Service (Title VI)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	XXXXXX
175	Basic Academic Remedial or Literacy Training, Service Provided by Comparable Services and Benefits Providers	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by comparable services and benefits providers.	1 = Service was provided in whole or part by comparable services and benefits providers
									Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.	
	Basic Academic Remedial or Literacy Training, Comparable Services and			Modified list		Training Services	Upon		Leave blank if service was not provided by a comparable	
176	Benefits Provider Type	VARCHAR 8	Yes	of choices		Data Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									Training provided to prepare an individual for work (e.g., work behaviors, interpersonal communication skills, increasing productivity, etc.).  Report at the time the service is provided.	
	Job Readiness Training, Service, Provided					Training Services	Upon			
177	by VR Agency Staff (in-house)	INT 1	No	No	-	Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Training provided to prepare an individual for work (e.g., work behaviors, interpersonal communication skills, increasing productivity, etc.).	
									Report at the time the service is provided.	
178	Job Readiness Training, Service Provided through VR Agency Purchase	INT 1	No	No		Training Services  Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through purchase by the VR agency, the Purchased Service Provider Type must be reported. For each service category, report the code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
179	Job Readiness Training, Service, Purchased Service Provider Type	INT 1	No	No		Training Services  Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	3 =Other Public Service Provider 4 =Other Private Service Provider
	The state of the s								Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.  Report at the time the expenditure is paid.	
	Job Readiness Training, Service, Amount					Training Services	Upon		Leave blank if service was not provided through purchase by	
180	of VR Funds Expended for Service (Title I)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	xxxxxx

Element			Multiple Values					Updateable (Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.	
									Report at the time the expenditure is paid.	
181	Job Readiness Training, Service, Amount of SE Funds Expended for Service (Title VI)	INT 6	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxxx
182	Job Readiness Training, Service Provided by Comparable Services and Benefits Providers	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by comparable services and benefits providers.	1 = Service was provided in whole or part by comparable services and benefits providers
183	Job Readiness Training, Comparable Services and Benefits Provider Type	VARCHAR 8	Yes	Modified list of choices		Training Services Data Elements	Upon Occurrence	Yes	Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.	See Appendix 5 for a list of comparable benefits providers
									Disability-related augmentative skills training includes but is not limited to: orientation and mobility; rehabilitation teaching; training in the use of low vision aids; Braille; speech reading; sign language; and cognitive training/retraining.	
									Report at the time the service is provided.	
184	Disability Related Skills Training, Service Provided by VR Agency Staff (in-house)	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Disability-related augmentative skills training includes but is not limited to: orientation and mobility; rehabilitation teaching; training in the use of low vision aids; Braille; speech reading; sign language; and cognitive training/retraining.	
									Report at the time the service is provided.	
185	Disability Related Skills Training, Service Provided through VR Agency Purchase	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
	Disability Related Skills Training,					Training Services	Upon			1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP 3 = Other Provider
186	Purchased Service Provider Type	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.	
	Disability Related Skills Training, Amount					Training Services	Upon		Report at the time the expenditure is paid.  Leave blank if service was not provided through purchase by	
187	of VR Funds Expended for Service (Title I)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.  Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.  Report at the time the expenditure is paid.	XXXXX
188	Disability Related Skills Training, Amount of SE Funds Expended for Service (Title VI)	INT 6	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxx

			Multiple					Updateable		
Element Number	Element Name	Data Type	Values Allowed	Change	PIRL Element	Report at	Report	(Y/N) after	Definitions or Instructions	Code Values
Number	Disability Related Skills Training, Service	рата туре	Allowed	Change	PIKL Element	Report at	керогі	initial reporting	Definitions of instructions	Code values
	Provided by Comparable Services and					Training Services	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
189	Benefits Providers	INT 1	No	No		Data Elements	Occurrence	Yes	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Disability Related Skills Training, Comparable Services and Benefits			Modified list		Training Services	Upon		Leave blank if service was not provided by a comparable	
190	Provider Type	VARCHAR 8	Yes	of choices		Data Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									Any training not included in one of the other categories	
									listed, including GED or secondary school training leading to	
									a diploma, or courses taken at four-year, junior or community colleges not leading to a certificate or diploma.	
									community coneges not leading to a certificate or diploma.	
							l		Report at the time the service is provided.	
191	Miscellaneous Training, Service Provided by VR Agency Staff (in-house)	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
	<u> </u>									
									Any training not included in one of the other categories listed, including GED or secondary school training leading to	
									a diploma, or courses taken at four-year, junior or	
									community colleges not leading to a certificate or diploma.	
									Report at the time the service is provided.	
									report at the time the service is provided.	
400	Miscellaneous Training, Service Provided		l	ļ.,		Training Services	Upon	,	Leave blank if service was not provided through purchase by	
192	through VR Agency Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	4. Dublic Community Debubliketian December (CDD)
										1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
	Miscellaneous Training, Purchased Service					Training Services	Upon		Leave blank if service was not provided through purchase by	3 =Other Public Service Provider
193	Provider Type	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
	Miscellaneous Training, Amount of VR					Training Services	Upon		Leave blank if service was not provided through purchase by	
194	Funds Expended for Service (Title I)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	XXXXXX
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in their IPEs and have already been placed in an employment	
									setting.	
									Panart at the time the expanditure is raid	
									Report at the time the expenditure is paid.	
	Miscellaneous Training, Amount of SE					Training Services	Upon		Leave blank if service was not provided through purchase by	
195	Funds Expended for Service (Title VI)	INT 6	No	No	-	Data Elements	Occurrence	Yes	VR agency.	XXXXXX
	Miscellaneous Training, Service Provided by Comparable Services and Benefits					Training Services	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
196	Providers	INT 1	No	No		Data Elements	Occurrence	Yes	services and benefits providers.	providers
									Panart up to three codes conserved by a serial and the serial and	
									Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Miscellaneous Training, Comparable			Modified list		Training Services	Upon		Leave blank if service was not provided by a comparable	
197	Services and Benefits Provider Type	VARCHAR 8	Yes	of choices		Data Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers

						1				
			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Training for establishing a small business or individualized	
									training through the Randolph-Sheppard program and	
									included on the IPE.	
	Randolph-Sheppard Entrepreneurial Training, Service Provided by VR Agency					Training Services	Upon		Report at the time the service is provided.	
198	Staff (in-house)	INT 1	No	No		Data Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Training for establishing a small business or individualized	
									training through the Randolph-Sheppard program and included on the IPE.	
									included on the IPE.	
									Report at the time the service is provided.	
	Randolph-Sheppard Entrepreneurial									
100	Training, Service Provided through VR		l			Training Services	Upon	.,	Leave blank if service was not provided through purchase by	
199	Agency Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
							l			2 = Private CRP
200	Randolph-Sheppard Entrepreneurial Training, Purchased Service Provider Type	INT 1	No	No		Training Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	4 =Other Private Service Provider
200	Training, Farchasea service Froviaci Type		110	110		Data Elements	Occurrence	163	vivugency.	4 - Other Friede Service Frontier
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
	Randolph-Sheppard Entrepreneurial Training, Amount of VR Funds Expended					Training Services	Upon		Leave blank if service was not provided through purchase by	
201	for Service (Title I)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	xxxxxx
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
	Randolph-Sheppard Entrepreneurial								Report at the time the expenditure is paid.	
	Training, Amount of SE Funds Expended					Training Services	Upon		Leave blank if service was not provided through purchase by	
202	for Service (Title VI)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	XXXXXX
	Randolph-Sheppard Entrepreneurial									
1	Training, Service Provided by Comparable					Training Services	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
203	Services and Benefits Providers	INT 1	No	No		Data Elements	Occurrence	Yes	services and benefits providers.	providers
									Depart up to three codes concernd himself and	
1									Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual	
1									with a comparable service or benefit.	
1	Randolph-Sheppard Entrepreneurial									
L	Training, Comparable Services and		l	Modified list		Training Services	Upon	L	Leave blank if service was not provided by a comparable	[
204	Benefits Provider Type	VARCHAR 8	Yes	of choices		Data Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
1										
1									A training program designed to meet the special	
1									requirements of an employer who has entered into an	
1									agreement with a service delivery area to hire individuals who are trained to the employer's specifications.	
									and and a standard of the employer of specifications.	
									Report at the time the service is provided.	
	Customized Training, Service Provided by		l	l.,		Training Services	Upon	l.		L
205	VR Agency Staff (in-house)	INT 1	No	No	l	Data Elements	Occurrence	Yes	Leave blank it service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff

			Multiple					Updateable		
Element		_	Values				_	(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									A training program designed to meet the special	
									requirements of an employer who has entered into an	
									agreement with a service delivery area to hire individuals	
									who are trained to the employer's specifications.	
									Donard and be discount to a considered	
									Report at the time the service is provided.	
	Customized Training, Service Provided					Training Services	Upon		Leave blank if service was not provided through purchase by	
206	through VR Agency Purchase	INT 1	No	No		Data Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
										1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
	Customized Training, Purchased Service					Training Services	Upon		Leave blank if service was not provided through purchase by	
207	Provider Type	INT 1	No	No		Data Elements		Yes	VR agency.	4 =Other Private Service Provider
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
	Customized Training, Amount of VR Funds					Training Services	Upon		Leave blank if service was not provided through purchase by	
208	Expended for Service (Title I)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	XXXXXX
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									December 1 and 1 a	
									Report at the time the expenditure is paid.	
	Customized Training, Amount of SE Funds					Training Services	Upon		Leave blank if service was not provided through purchase by	
209	Expended for Service (Title VI)	INT 6	No	No		Data Elements	Occurrence	Yes	VR agency.	XXXXXX
	Customized Training, Service Provided by									
l	Comparable Services and Benefits		l	L.		Training Services	Upon			1 = Service was provided in whole or part by comparable services and benefits
210	Providers	INT 1	No	No	<del>                                     </del>	Data Elements	Occurrence	Yes	services and benefits providers.	providers
			1	1	1		1	1	Report up to three codes, separated by semicolons, that best	
			1	1	1		1	1	describes the service providers who provided the individual	
			1		1		1	1	with a comparable service or benefit.	
	Contaminal Training Conservation			MANAGE - 1 th-		Taninina Comitana			Land black if and in the second of the secon	
211	Customized Training, Comparable Services and Benefits Provider Type	VARCHAR 8	Yes	Modified list of choices		Training Services  Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by a comparable service or benefit	See Appendix 5 for a list of comparable benefits providers
	and sellend Fromder Type	*ANCHAR O	163	or choices		Data Liemelits	Sccurrence		Service of Bellett	See Appendix 5 for a list of comparable benefits providers
			1		1		1	1		
			1		1		1	1		
				1					Assessment means services provided and activities performed to determine an individual's eligibility for VR	
			1	1	1		1	1	services, to assign an individual to a priority category of a VR	
				1					program that operates under an order of selection, and/or	
			1	1	1		1	1	to determine the nature and scope of VR services to be	
				1					included in the IPE. It also includes trial work experiences.	
									L	
	Assessment, Service Provided by VR		1		1	Career Services Data	lunan	1	Report at the time the service is provided.	
212	Assessment, Service Provided by VK Agency Staff (in-house)	INT 1	No	No	1	Elements		Yes	Leave blank if service was not provided by VR agency staff	1 = Service was provided in whole or part by VR agency staff
	(in name)			1						

			Multiple					Updateable		
Flement			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
		,,						,	-	
									Assessment means services provided and activities	
									performed to determine an individual's eligibility for VR	
									services, to assign an individual to a priority category of a VR	
									program that operates under an order of selection, and/or	
									to determine the nature and scope of VR services to be included in the IPE. It also includes trial work experiences.	
									Included in the IPE. It also includes that work experiences.	
									Report at the time the service is provided.	
									neport at the time the service is provided.	
	Assessment, Service Provided through VR					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
213	Agency Purchase	INT 1	No	No		Elements		Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
	g,								· · · · · · · · · · · · · · · · · · ·	
									If the continuous accorded in whate or next through	
									If the service was provided in whole or part through purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
										1 = Public Community Rehabilitation Program (CRP)
									code value that best describes the primary service provider.	2 = Private CRP
	Assessment, Purchased Service Provider					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
214	Туре	INT 1	No	No		Elements		Yes	VR agency.	4 =Other Private Service Provider
				1					- '	
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
							l		l	
245	Assessment, Amount of VR Funds		l			Career Services Data		.,	Leave blank if service was not provided through purchase by	yyanay
215	Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
	Assessment, Amount of SE Funds					Career Services Data			Leave blank if service was not provided through purchase by	
216	Expended for Service (Title VI)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
		1	1	1					L	
	Assessment, Service Provided by					C Ci D			Report up to three codes, separated by semicolons, that best	1 - C
217	Comparable Services and Benefits	INT 1	l <sub>No</sub>	No		Career Services Data		Vos		1 = Service was provided in whole or part by comparable services and benefits
217	Providers	INT 1	No	No		Elements	Occurrence	Yes	with a comparable service or benefit.	providers
		1	1	1					Report up to three codes, separated by semicolons, that best	
		1	1	1					describes the service providers who provided the individual	
		1	1	1					with a comparable service or benefit.	
		1	1	1					·	
	Assessment, Comparable Services and			Modified list		Career Services Data	Upon		Leave blank if service was not provided by a comparable	
218	Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
		1	1	1					L	
		1	1	1					Corrective surgery or therapeutic treatment, diagnosis and	
									treatment of metal and emotional disorders, dentistry,	
		1	1	1					nursing services, necessary hospitalization, drugs and	
									supplies, prosthetics, eye glasses, podiatry, physical therapy,	
									occupation therapy, speech or hearing therapy, mental	
									health services, treatment of acute or chronic medical	
		1	1	1					complications, other medical or medically related	
									rehabilitation services.	
	Diagnosis and Treatment of Impairments,	1	1	1					Report at the time the service is provided.	
	Service Provided by VR Agency Staff (in-					Career Services Data	Unon		neport at the time the service is provided.	
219	house)	INT 1	No	No			Occurrence	Yes	Leave blank if service was not provided by VR agency staff	1 = Service was provided in whole or part by VR agency staff
				-					, provided by the agency stuff.	- p , • agency seem

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Corrective surgery or therapeutic treatment, diagnosis and	
									treatment of metal and emotional disorders, dentistry,	
1									nursing services, necessary hospitalization, drugs and	
1									supplies, prosthetics, eye glasses, podiatry, physical therapy,	
1									occupation therapy, speech or hearing therapy, mental	
									health services, treatment of acute or chronic medical	
									complications, other medical or medically related	
									rehabilitation services.	
									Report at the time the service is provided.	
	Diagnosis and Treatment of Impairments,									
	Service Provided through VR Agency					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
220	Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
			1	1	I		1	l	If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
										2 = Private CRP
	Diagnosis and Treatment of Impairments,					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
221	Purchased Service Provider Type	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
1									share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									include unliquidated obligations of encumbrances.	
									Report at the time the expenditure is paid.	
	Diagnosis and Treatment of Impairments,								neport at the time the expenditure is paid.	
	Amount of VR Funds Expended for Service					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
222	(Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx
	,								* ,	
									Report the quarterly Supported Employment Services	
1									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
	Diameter of Tanahara (1997)								Report at the time the expenditure is paid.	
	Diagnosis and Treatment of Impairments, Amount of SE Funds Expended for Service					Career Services Data			Leave blank if service was not provided through purchase by	
223	(Title VI)	INT 6	No	No		Elements		Yes	VR agency.	xxxxxx
223	Time 11		1.40			elements.	Securrence		vir agency.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Diagnosis and Treatment of Impairments,				1					
	Service Provided by Comparable Services				1	Career Services Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
224	and Benefits Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
					1				Report up to three codes, separated by semicolons, that best	
			1	1	I		1	l	describes the service providers who provided the individual	
					1				with a comparable service or benefit.	
	Diagnosis and Treatment of Impairments,		1	1	I		1	l		
l	Comparable Services and Benefits	l	l.,	Modified list	1	Career Services Data		l	Leave blank if service was not provided by a comparable	[
225	Provider Type	VARCHAR 8	Yes	of choices	ļ	Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
			1	1	1		1	l		
			1	1	I		1	l	Vocational rehabilitation counseling and guidance includes	
			1	1	I		1	l	information and support services to assist an individual in	
					1				exercising informed choice.	
					1				exercising interflied choice.	
	Vocational Rehabilitation Counseling and				1				Report at the time the service is provided.	
	Guidance, Service Provided by VR Agency				1	Career Services Data	Upon			
226	Staff (in-house)	INT 1	No	No	1	Elements		Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
			•	•					. , , , , , , , , , , , , , , , , , , ,	

			Multiple					Updateable		
Flement			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report		Definitions or Instructions	Code Values
1									Vocational rehabilitation counseling and guidance includes	
1									information and support services to assist an individual in	
1									exercising informed choice.	
1										
1									Report at the time the service is provided.	
1	Vocational Rehabilitation Counseling and									
1	Guidance, Service Provided by through VR					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
227	Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
1									If the service was provided in whole or part through	
1									purchase by the VR agency, the Purchased Service Provider	
1									Type must be reported. For each service category, report the	
1										1 = Public Community Rehabilitation Program (CRP)
1	Vocational Rehabilitation Counseling and									2 = Private CRP
1	Guidance, Purchased Service Provider					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
228	Type	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
223	1760		1.00	110		Elements	occurrence	1.00	The agency.	T Other Titude Service Trottage
									Report the quarterly VR program expenditures for the	
1									purchased service. Expenditures may include non-Federal	
1									share and VR program Federal funds, including program	
1									income, used to purchase the service. Expenditures do not	
1									include unliquidated obligations or encumbrances.	
1										
1									Report at the time the expenditure is paid.	
1	Vocational Rehabilitation Counseling and									
1	Guidance, Amount of VR Funds Expended					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
229	for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx
	·								-	
1									Report the quarterly Supported Employment Services	
1									program expenditures for the purchased service. Recipients	
1									of these funds must have a supported employment goal in	
1									their IPEs and have already been placed in an employment	
1									setting.	
1										
1									Report at the time the expenditure is paid.	
1	Vocational Rehabilitation Counseling and									
1	Guidance, Amount of SE Funds Expended					Career Services Data			Leave blank if service was not provided through purchase by	
230	for Service (Title VI)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
	Vocational Rehabilitation Counseling and									
1	Guidance, Service Provided by									
	Comparable Services and Benefits					Career Services Data	Upon	I	Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
231	Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
				1					·	
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
						I	1	I	with a comparable service or benefit.	
	Vocational Rehabilitation Counseling and									
	Guidance, Comparable Services and			Modified list		Career Services Data	Upon		Leave blank if service was not provided by a comparable	
232	Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
							l			
		1		1		1	1			
									Job search activities support and assist an individual in	
									searching for an appropriate job. Job search assistance may	
						I	1	I	include help in resume preparation, identifying appropriate	
									job opportunities, developing interview skills, and making	
						I	1	I	contacts with companies on behalf of the consumer.	
									Report at the time the service is provided.	
	Job Search Assistance, Service Provided by					Career Services Data		I		
233	VR Agency Staff (in-house)	INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Job search activities support and assist an individual in	
									searching for an appropriate job. Job search assistance may	
									include help in resume preparation, identifying appropriate	
									job opportunities, developing interview skills, and making	
									contacts with companies on behalf of the consumer.	
									Report at the time the service is provided.	
	Job Search Assistance, Service Provided					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
234	through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the ∨R agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
	Job Search Assistance, Purchased Service					Career Services Data	Unon		Leave blank if service was not provided through purchase by	2 = Private CRP
235	Provider Type	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	4 = Other Private Service Provider
200	Trovider Type		110	110		Elements	Occurrence	100	Vivagency.	- Other Hivate Service Howard
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
	Job Search Assistance, Amount of VR					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
236	Funds Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
									B	
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
									l	
227	Job Search Assistance, Amount of SE	INIT C	NI-	NI-			Upon	V	Leave blank if service was not provided through purchase by	VANOVA .
237	Funds Expended for Service (Title VI)	INT 6	No	No		Elements	Occurrence	res	VR agency.	XXXXXX
	Job Search Assistance, Service Provided by								L	L
238	Comparable Services and Benefits Providers	INT 1	No	No		Career Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by comparable services and benefits providers.	1 = Service was provided in whole or part by comparable services and benefits providers
238	Providers	INI 1	INO	NO		Elements	Occurrence	res	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
			1						describes the service providers who provided the individual	
									with a comparable service or benefit.	
	[		1	L		l			l	
1220	Job Search Assistance, Comparable	VARCUARA	\	Modified list		Career Services Data		V	Leave blank if service was not provided by a comparable	Can Annually 5 for a list of company high page 5 and 1 days
239	Services and Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									Job placement assistance is a referral to a specific job	
			1	l					resulting in an interview, regardless of whether or not the	
									individual obtained the job.	
	[		1						L	
	Job Placement Assistance, Service		1				l		Report at the time the service is provided.	
240	Provided by VR Job Placement Assistance,	INIT 1	No.	No		Career Services Data		Vos	Leave black if conice was not asserted by VP asserted	1 = Sanisa was provided in whole or part by VP
240	Agency Staff (in-house)	INT 1	No	INO		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.  Job placement assistance is a referral to a specific job	1 = Service was provided in whole or part by VR agency staff
			1						resulting in an interview, regardless of whether or not the	
			1						individual obtained the job.	
			1							
									Report at the time the service is provided.	
	[ <u>.</u>					L			l	
241	Job Placement Assistance, Service Provided through VR Agency Purchase	INT 1	l	l.,_		Career Services Data		v	Leave blank if service was not provided through purchase by	1 = Service was provided in whole or part through purchase by the VR agency
241	r rovided unrough viv Agency Purchase	UAL T	LINO	LIAO		Liellielle	Occurrence	Yes	VR agency.	1 - Service was provided in whole or part unrough purchase by the VK agency

			Multiple					Updateable		
Flement			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
										2 = Private CRP
242	Job Placement Assistance, Purchased Service Provider Type	INT 1	No.	No		Career Services Data Elements		Yes	Leave blank if service was not provided through purchase by	3 =Other Public Service Provider 4 =Other Private Service Provider
242	Service Provider Type	INII	NO	NO		Elements	Occurrence	Yes	VR agency.	4 = Other Private Service Provider
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
									nepore at the time the expenditure is paid.	
	Job Placement Assistance, Amount of VR					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
243	Funds Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
									l	
244	Job Placement Assistance, Amount of SE Funds Expended for Service (Title VI)	INT 6	No	No		Career Services Data Elements	Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxxx
244		INTO	INO	INO		ciements	Occurrence	res	VK agency.	,,,,,,,,
	Job Placement Assistance, Service						l			
245	Provided by Comparable Services and Benefits Providers	INT 1	No	No		Career Services Data Elements	Occurrence	Yes	Leave blank if service was not provided by comparable services and benefits providers.	1 = Service was provided in whole or part by comparable services and benefits providers
243	bellelits Flowiders	INT	INO	NO		Lienients	Occurrence	163	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Job Placement Assistance, Comparable			Modified list		Career Services Data	Upon		Leave blank if service was not provided by a comparable	
246	Services and Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
240	services and benefits Frovider Type	VAILERIALIO	1.03	OT CHOICES		Licinonio	Occurrence	103	Service of Benefit	See Appendix 5 for a list of comparable benefits providers
									Support services provided to an individual who has been	
									placed in employment in order to stabilize the placement	
									and enhance job retention.	
									Report at the time the service is provided.	
	Short Term Job Supports, Service					Career Services Data	Upon		neport at the time the service is provided.	
247	Provided by VR Agency Staff (in-house)	INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Support services provided to an individual who has been	
									placed in employment in order to stabilize the placement and enhance job retention.	
			1	1	1				and emance job recention.	
			1	1	1				Report at the time the service is provided.	
			1	1	1					
	Short Term Job Supports, Service		1	1	1	Career Services Data			Leave blank if service was not provided through purchase by	
248	Provided through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
			1	1	1					
			1	1	1				If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	A Dublic Community Debublication December (2000)
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
	Short Term Job Supports, Purchased		1	1	1	Career Services Data	Upon		Leave blank if service was not provided through purchase by	
249	Service Provider Type	INT 1	No	No				Yes		4 =Other Private Service Provider
			•	•	•					

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at			Definitions or Instructions	Code Values
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									include uninquidated obligations of effectivities.	
									Report at the time the expenditure is paid.	
	Short Term Job Supports, Amount of VR					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
250	Funds Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment setting.	
									setting.	
									Report at the time the expenditure is paid.	
	Short Term Job Supports, Amount of SE					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
251	Funds Expended for Service (Title VI)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
	Short Term Job Supports, Service									
	Provided by Comparable Services and					Career Services Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
252	Benefits Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
									·	
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Short Term Job Supports, Comparable	l	l	Modified list			Upon	l	Leave blank if service was not provided by a comparable	
253	Services and Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									Supported employment services are ongoing support	
									services, including customized employment, and other	
									appropriate services needed to support an individual with a	
									most significant disability in maintaining supported	
									employment.	
	Supported Employment Services, Service								Report at the time the service is provided.	
	Provided by Supported Employment					1	Upon			
254	Services, VR Agency Staff (in-house)	INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Supported employment services are ongoing support	
1		1	1						services, including customized employment, and other	
1		1	1						appropriate services needed to support an individual with a	
1		1	1						most significant disability in maintaining supported	
									employment.	
1		1	1							
1		1	1						Report at the time the service is provided.	
	Supported Employment Services, Service					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
255	Provided through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
1		1	1						purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
										2 = Private CRP
25.0	Supported Employment Services,	INT 1		N-		Career Services Data Elements			Leave blank if service was not provided through purchase by	3 =Other Public Service Provider 4 =Other Private Service Provider
256	Purchased Service Provider Type	INT 1	INO	INO	l	ciements	Occurrence	res	VR agency.	4 =Other Private Service Provider

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Down and the contract of the c	
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									initiade diffiquidated obligations of circumstances.	
									Report at the time the expenditure is paid.	
	Supported Employment Services, Amount					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
257	of VR Funds Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
									Boundary Construction Comments of Construction Construction	
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									,	
									Report at the time the expenditure is paid.	
	Supported Employment Services, Amount					Career Services Data			Leave blank if service was not provided through purchase by	
258	of SE Funds Expended for Service (Title VI)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
	Supported Employment Services, Service									
	Provided by Comparable Services and					Career Services Data				1 = Service was provided in whole or part by comparable services and benefits
259	Benefits Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Supported Employment Services,								This a comparable control of Zenema	
	Comparable Services and Benefits			Modified list		Career Services Data	Upon		Leave blank if service was not provided by a comparable	
260	Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									Information and referral services are provided to individuals	
									who need services from other agencies	
									Report at the time the service is provided.	
	Information and Referral Services, Service					Career Services Data	Upon		neport at the time the service is provided.	
		INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Information and referral services are provided to individuals	
									who need services from other agencies	
									Report at the time the service is provided.	
	Information and Referral Services, Service					Career Services Data	Hnon		Leave blank if service was not provided through purchase by	
		INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
202	Trottage through through through					Liemene	o courrence		Vivagencyi	2 of the track from the first the second of the trackets
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
				İ					Type must be reported. For each service category, report the	
				İ						1 = Public Community Rehabilitation Program (CRP)
				l					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2 = Private CRP
	Information and Referral Services,			l		Career Services Data	Upon		Leave blank if service was not provided through purchase by	3 =Other Public Service Provider
263	Purchased Service Provider Type	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
									Donat the superior (VD section 1)	
				l					Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal	
				l					share and VR program Federal funds, including program	
				l					income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
			1	1						
									Report at the time the expenditure is paid.	
	Information and Referral Services,									
	Amount of VR Funds Expended for Service		l	l		Career Services Data		L	Leave blank if service was not provided through purchase by	<u> </u>
264	(Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
	Information and Referral Services,									
265	Amount of SE Funds Expended for Service (Title VI)	INT 6	No	No		Career Services Data Elements	Upon	V	Leave blank if service was not provided through purchase by	xxxxxx
265	Information and Referral Services, Service	INI 6	NO	NO		Elements	Occurrence	Yes	VR agency.	XXXXX
	Provided by Comparable Services and					Career Services Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
266		INT 1	No	No		Elements	Occurrence	Yes		providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
	Information and Referral Services,								with a comparable service or benefit.	
	Comparable Services and Benefits		1	Modified list		Career Services Data	Upon		Leave blank if service was not provided by a comparable	
	Provider Type	VARCHAR 8	Yes	of choices	<u> </u>	Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									Assistance provided to an individual who is interested in	
									becoming employed, but is uncertain of the impact work	
									income may have on any disability benefits and entitlements	
									being received, and/or is not aware of benefits, such as	
									access to healthcare, that might be available to support	
									employment efforts.	
									Report at the time the service is provided.	
268	Benefits Counseling, Service Provided by VR Agency Staff (in-house)	INT 1	No	No		Career Services Data Elements	Upon Occurrence	Voc	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
200	VN Agency Stair (in-nouse)	INT	INO	NO		Lienients	Occurrence	res	Leave blank it service was not provided by VK agency stan.	1 - Service was provided in whole or part by VK agency stair
									Assistance provided to an individual who is interested in	
									becoming employed, but is uncertain of the impact work	
									income may have on any disability benefits and entitlements	
									being received, and/or is not aware of benefits, such as access to healthcare, that might be available to support	
									employment efforts.	
									employment chorts.	
									Report at the time the service is provided.	
	Benefits Counseling, Service Provided						Upon		Leave blank if service was not provided through purchase by	
269	through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
			1						purchase by the VR agency, the Purchased Service Provider	
			1						Type must be reported. For each service category, report the	
			1						code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
						l			<u> </u>	2 = Private CRP
270	Benefits Counseling, Purchased Service Provider Type	INT 1	No	No		Career Services Data Elements	Upon Occurrence	V	Leave blank if service was not provided through purchase by VR agency.	3 =Other Public Service Provider 4 =Other Private Service Provider
2/0	Provider Type	IIVI I	INO	INO		cierrients	Occurrence	162	vn agency.	4 =Other Private Service Provider
			1						Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
			1						share and VR program Federal funds, including program	
			1						income, used to purchase the service. Expenditures do not	
			1						include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
			1						report at the time the expenditure is paid.	
	Benefits Counseling, Amount of VR Funds		1			Career Services Data	Upon		Leave blank if service was not provided through purchase by	
271	Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx

			Multiple					Updateable		
Element			Values				_	(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
									,	
	Benefits Counseling, Amount of SE Funds						Upon		Leave blank if service was not provided through purchase by	
272	Expended for Service (Title VI)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
	Benefits Counseling, Service Provided by Comparable Services and Benefits					C C			Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
273	Providers	INT 1	No	No		Career Services Data Elements	Upon Occurrence	Vos	services and benefits providers.	providers
2/3	Florideis	INTI	INO	NO		Lienients	Occurrence	ies	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
274	Benefits Counseling, Comparable Services and Benefits Provider Type	VARCHAR 8	Yes	Modified list of choices		Career Services Data Elements	Occurrence	Yes	Leave blank if service was not provided by a comparable service or benefit	See Appendix 5 for a list of comparable benefits providers
2/4	and Benefits Provider Type	VARCHAR 6	res	of choices		ciements	Occurrence	res	service or benefit	see Appendix 5 for a list of comparable benefits providers
									Designed to meet the specific abilities of the individual with	
									a significant disability and the business needs of the	
									employer; and carried out through flexible strategies such as	
									job exploration.	
									Report at the time the service is provided.	
	Customized Employment Services, Service					Career Services Data	Upon		report at the time the service is provided.	
275		INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Designed to meet the specific abilities of the individual with	
									a significant disability and the business needs of the	
									employer; and carried out through flexible strategies such as job exploration.	
									job exploration.	
									Report at the time the service is provided.	
									,	
	Customized Employment Services, Service					Career Services Data			Leave blank if service was not provided through purchase by	
276	Provided through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	1 - Dublic Community Dehabilitation Program (CDD)
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
	Customized Employment Services,					Career Services Data	Upon		Leave blank if service was not provided through purchase by	
277	Purchased Service Provider Type	INT 1	No	No		Elements		Yes		4 =Other Private Service Provider
1		1			1				Report the quarterly VR program expenditures for the	
1		1			1				purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
1		1			1				• •	
1		1			1				Report at the time the expenditure is paid.	
1	Customized Employment Services,	1			1					
1,70	Amount of VR Funds Expended for Service (Title I)	INT 6	I	<sub>N-</sub>		Career Services Data			Leave blank if service was not provided through purchase by	  xxxxxx
278	(True I)	INI b	No	No	-	Elements	Occurrence	Yes	VR agency.	AAAAAA
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
1		1			1				their IPEs and have already been placed in an employment	
1		1			1				setting.	
									Report at the time the expenditure is paid.	
1	Customized Employment Services,	1			1				neport at the time the expenditure is paid.	
	Amount of SE Funds Expended for Service	1			1	Career Services Data	Upon		Leave blank if service was not provided through purchase by	
279	(Title VI)	INT 6	No	No	<u> </u>	Elements	Occurrence	Yes	VR agency.	xxxxxx
-					-	_				

			Multiple					Updateable		
Element	Element Name	Data Tara	Values Allowed	Ch	PIRL Element			(Y/N) after	D. C. Warren and Landson	Code Velice
Number	Element Name  Customized Employment Services, Service	Data Type	Allowed	Change	PIKL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
	Provided by Comparable Services and					Career Services Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
	Benefits Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
	Customized Employment Services,								Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.	
281	Comparable Services and Benefits Provider Type	VARCHAR 8	Yes	Modified list of choices		Career Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by a comparable service or benefit	See Appendix 5 for a list of comparable benefits providers
									Ongoing support services and other appropriate services that are needed to support and maintain an individual with a most significant disability.  Report at the time the service is provided.	
	Extended Services, Service Provided by VR					Career Services Data	Upon		neport at the time the service is provided.	
282	Agency Staff (in-house)	INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Ongoing support services and other appropriate services that are needed to support and maintain an individual with a most significant disability.	
									Report at the time the service is provided.	
	Extended Services, Service Provided through VR Agency Purchase	INT 1	No	No		Career Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
	Extended Services, Purchased Service Provider Type	INT 1	No	No		Career Services Data Elements	Upon Occurrence	Yes	If the service was provided in whole or part through purchase by the VR agency, the Purchased Service Provider Type must be reported. For each service category, report the code value that best describes the primary service provider.  Leave blank if service was not provided through purchase by VR agency.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP 3 = Other Public Service Provider 4 = Other Private Service Provider
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.  Report at the time the expenditure is paid.	
285	Extended Services, Amount of VR Funds Expended for Service (Title I)	INT 6	No	No		Career Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxxx
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.	
									Report at the time the expenditure is paid.	
	Extended Services, Amount of SE Funds Expended for Service (Title VI)	INT 6	No	No		Career Services Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxx
									Travel and related expenses that are necessary to enable an applicant or eligible individual to participate in a VR service, including expenses for training in the use of public transportation vehicles and systems.	
287	Transportation Data Elements, Service Provided by VR Agency Staff (in-house)	INT 1	No	No		Other Service Data Elements	Upon Occurrence	Yes	Report at the time the service is provided. Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff

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Control   Cont				Multiple					Undateable		
State of the control former of the control f	Flement										
Transportion like Tennes, Service Transp		Element Name	Data Type		Change	PIRL Element	Report at	Report		Definitions or Instructions	Code Values
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Industry operation of past General, Service  Transport scan Data Chemistry, Service  Playmont of control as provided, provided											
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Transportation four Beauth, Fernicus  Other Foreign Equation  Foreign Equation  Other Foreign Equation											
Other Protoco Course Streeged 25 Septing Produces  The Course Streeged 25 Sept										transportation vehicles and systems.	
Transportation Data Bromate, Sendar Service State Blomate (1) No. 100 100 100 100 100 100 100 100 100 10											
Communication   Communicatio										Report at the time the service is provided.	
Processed strongs of Agreement   Processed Strong of Agreeme											
Transpertation Data Elements, Amount of 20   Wilson's process of the contract of the contrac	1										L
Transportation Data Benerits, Furchased  Other Service Data  Other	288	Provided through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
Transportation Data Berents, Purchased  Other Service Data  For approach of the Service Data Berents, Purchased  Other Service Data  Other Service											
Transpertation Des Glements, Purchased 29 Service Production Service College (page 1982) 20 Service Production Service Production Service Production Service Service Production Service Service Production Service Service Production Service Service Production Service Service Production Service Service Production Service Service Production Service Serv											
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Provided for Service Data   Provider   Provided by NT   No   Provided by NT   NT   NT   NT   NT   NT   NT   NT	289	Service Provider Type	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
Provided for Service Data   Provider   Provided by NT   No   Provided by NT   NT   NT   NT   NT   NT   NT   NT										Report the quarterly VR program expenditures for the	
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Provided by Comparable Services and Benefits Providers  INT 1 No No Elements Occurrence Yes services and benefits providers  Report up to three codes, separated by services and benefits providers  Report up to three codes, separated by service or benefit.  Comparable Services and Benefits Provider Type  VARCHAR 8 Yes of choices  Maintenance, Service Provided by VR Agency Staff (in-house)  Maintenance, Service Provided through  Monet Service Data Upon  Leave blank if service was not provided by VR agency staff.  Leave blank if service was not provided by Comparable services and benefits providers  Providers  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided in whole or part by VR agency staff.  1 = Service was provided in whole or part by VR agency staff.  1 = Service was provided in whole or part by VR agency staff.  1 = Service was provided in whole or part by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Report at the time the service is provided.  Report at the time the service is provided through purchase by		Transportation Data Elements, Service									
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Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.  Transportation Data Elements, Comparable Services and Benefits Provider Type  VARCHAR 8  Vas  Modified list Other Service Data Elements Occurrence Flements Occurrence Occ			INT 1	No	No				Yes		
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Transportation Data Elements, Comparable Services and Benefits Provider Type  VARCHAR 8										Report up to three codes, separated by semicolons, that best	
Transportation Data Elements, Comparable Services and Benefits Provider Type  VARCHAR 8  Ves  Modified list of choices  Demonstrate Elements Occurrence Forwider Type  VARCHAR 8  Ves  Modified list of choices  Demonstrate Elements Occurrence Ves  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided by VR agency staff.  Maintenance, Service Provided by VR agency Staff (in-house)  Maintenance, Service Provided through  urchase by										describes the service providers who provided the individual	
Comparable Services and Benefits Provider Type  VARCHAR 8  Ves  Modified list Other Service Data Elements  Other Service Data Upon Occurrence Ves  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service was not provided by VR agency staff.  Maintenance, Service Provided through  Modified list Other Service Data Upon Other Service Data Upon Other Service Data Upon Other Service Data Upon Upon Upon Leave blank if service was not provided by a comparable service service as food, shelter and clothing that are in excess of the normal expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Other Service Data Upon Upon Upon Upon Upon Upon Upon Upon				1	1					with a comparable service or benefit.	
Provider Type  VARCHAR 8  Ves  of choices  Elements  Occurrence  Ves  service or benefit  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided by VR  Agency Staff (in-house)  INT 1  No  No  Other Service Data  Upon  Occurrence  Ves  Leave blank if service was not provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Monetary support provided by VR agency staff.  I = Service was provided in whole or part by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Maintenance, Service Provided through  Maintenance, Service Provided through  Upon  Upon  Leave blank if service was not provided through purchase by				1	1						
Maintenance, Service Provided by VR 294 Agency Staff (in-house)  INT 1  No  No  No  Other Service Data Elements  Occurrence Ves  Leave blank if service was not provided.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses for the individual.  Report at the time the service is provided.  Leave blank if service was not provided by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Maintenance, Service Provided through  Other Service Data Upon  Leave blank if service was not provided through purchase by											
Shelter and clothing that are in excess of the normal expenses of the individual.  Maintenance, Service Provided by VR  294 Agency Staff (in-house)  INT 1 No No Elements  Cocurrence Yes Leave blank if service was not provided by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the individual.  Report at the time the service was provided in whole or part by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Maintenance, Service Provided through  Maintenance, Service Provided through  Leave blank if service was not provided through purchase by	293	Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
Shelter and clothing that are in excess of the normal expenses of the individual.  Maintenance, Service Provided by VR  294 Agency Staff (in-house)  INT 1 No No Elements  Cocurrence Yes Leave blank if service was not provided by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the individual.  Report at the time the service was provided in whole or part by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Maintenance, Service Provided through  Maintenance, Service Provided through  Leave blank if service was not provided through purchase by										Monetary support provided for living expenses such as food	
Maintenance, Service Provided by VR 294 Agency Staff (in-house)  INT 1  No  No  No  No  No  No  No  No  No  N				1	1						
Maintenance, Service Provided by VR 294 Agency Staff (in-house)  INT 1  No  No  No  No  Other Service Data Elements  Cocurrence Yes  Leave blank if service was not provided by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the individual.  Report at the time the service is provided.  1 = Service was provided in whole or part by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the individual.  Report at the time the service is provided.  Upon  Leave blank if service was not provided through purchase by				1	1					-	
Maintenance, Service Provided by VR Agency Staff (in-house)  No No No No No No No No No No No No No										expenses or the maintain.	
Maintenance, Service Provided by VR Agency Staff (in-house)  No No No No No No No No No No No No No										Report at the time the service is provided.	
Agency Staff (in-house) INT 1 No No Selements Occurrence Yes Leave blank if service was not provided by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the individual.  Maintenance, Service Provided through Other Service Data Upon Leave blank if service was not provided by VR agency staff.  1 = Service was provided in whole or part by VR agency staff.  Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the individual.  Report at the time the service is provided.  Leave blank if service was not provided through purchase by		Maintenance, Service Provided by VR					Other Service Data	Upon		,	
Monetary support provided for living expenses such as food, shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Maintenance, Service Provided through  Other Service Data  Upon  Leave blank if service was not provided through purchase by			INT 1	No	No				Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
shelter and clothing that are in excess of the normal expenses of the individual.  Report at the time the service is provided.  Maintenance, Service Provided through  Other Service Data Upon  Leave blank if service was not provided through purchase by											
Maintenance, Service Provided through  Other Service Data Upon  Leave blank if service was not provided through purchase by				1	1						
Maintenance, Service Provided through Other Service Data Upon Leave blank if service was not provided through purchase by										expenses of the individual.	
Maintenance, Service Provided through Other Service Data Upon Leave blank if service was not provided through purchase by											
										Report at the time the service is provided.	
				1	1						
[295   VR Agency Purchase   INT 1   No   No   Elements   Occurrence   Yes   VR agency.   1 = Service was provided in whole or part through purchase by the VR agency											[
	295	VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
										2 = Private CRP
	Maintenance, Purchased Service Provider					Other Service Data	Upon	l		3 =Other Public Service Provider
296	Туре	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
	Maintenance, Amount of VR Funds					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
297	Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx
237	expended for service (rice i)		1	110		Elements	Gecurrence	103	vivagency.	700000
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
									neport at the time the expenditure is paid.	
	Maintenance, Amount of SE Funds					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
298	Expended for Service (Title VI)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx
	Maintenance, Service Provided by								•	
	Comparable Services and Benefits					Other Service Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
299	Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Maintenance, Comparable Services and			Modified list		Other Service Data	Upon		Leave blank if service was not provided by a comparable	
300	Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
	,,									·
									Systematic application of technologies, engineering	
									methodologies, or scientific principles to meet the needs of,	
									and address the barriers confronted by, individuals with disabilities.	
									uisabilities.	
									Report at the time the service is provided.	
	Rehabilitation Technology, Service					Other Service Data	Upon		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
301	Provided by VR Agency Staff (in-house)	INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Systematic application of technologies, engineering	
									methodologies, or scientific principles to meet the needs of,	
			1	1			1		and address the barriers confronted by, individuals with disabilities.	
									ansasmices.	
									Report at the time the service is provided.	
									· ·	
	Rehabilitation Technology, Service					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
302	Provided through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
				I			1			
				I			1		If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	[
										1 = Public Community Rehabilitation Program (CRP)
	Rehabilitation Technology, Purchased					Other Service Data	Upon		Leave blank if service was not provided through purchase by	2 = Private CRP
303	Service Provider Type	INT 1	No	No		Flements	Occurrence	Yes		4 = Other Private Service Provider
303	Service Frommer Type	1041.4	1.40	1		comens	Securrence		+ n agenrali	. Other i mate pervice i rovider

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report		Definitions or Instructions	Code Values
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									include uniquidated obligations of encumbrances.	
									Report at the time the expenditure is paid.	
									Report at the time the expenditure is paid.	
							l		l	
	Rehabilitation Technology, Amount of VR					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
304	Funds Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
	Rehabilitation Technology, Amount of SE					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
305		INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx
	Rehabilitation Technology, Service								,	
	Provided by Comparable Services and					Other Service Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
306	Benefits Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
555	Delicitio 110 tituei o		110	110		Licinones	o courrence	100	Services and penetres providers.	provider
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual	
									with a comparable service or benefit.	
									with a comparable service of benefit.	
	Rehabilitation Technology, Comparable			Modified list		Other Service Data	Upon		Leave blank if service was not provided by a comparable	
307		VARCHAR 8	Yes	of choices		Elements	Occurrence	V	service or benefit	See Appendix 5 for a list of comparable benefits providers
307	Services and Benefits Provider Type	VARCHAR 6	res	of choices	ł	ciements	Occurrence	res	service or benefit	see Appendix 5 for a list of comparable benefits providers
									Services designed to assist an individual with a disability	
									perform daily living activities, increase control in life and	
									ability to perform routine tasks, provided in conjunction with	
									other VR services, and are necessary for achieving an	
									employment outcome.	
									Report at the time the service is provided.	
	Personal Assistance Services, Service					Other Service Data	Upon			
308	Provided by VR Agency Staff (in-house)	INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Services designed to assist an individual with a disability	
									perform daily living activities, increase control in life and	
			1				I	1	ability to perform routine tasks, provided in conjunction with	
							I		other VR services, and are necessary for achieving an	
							I		employment outcome.	
							I			
									Report at the time the service is provided.	
									[ ·	
	Personal Assistance Services, Service					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
309		INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
1555	an ough an Agency I drendse		1.10	1.10			_ ccarrence			
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
							I		code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
							I		1	2 = Private CRP
	Personal Assistance Services, Purchased					Other Service Data	Upon		Leave blank if service was not provided through purchase by	3 =Other Public Service Provider
1		INT 1	No.	No		Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
310										

			Multiple					Updateable		
Element Number	Element Name	Data Type	Values Allowed	Change	PIRL Element	Report at	Report	(Y/N) after initial reporting	Definitions or Instructions	Code Values
Number	Element Name	Data Type	Allowed	Change	FIRE Element	кероптат	кероп	mittai reporting		code values
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
									report at the time the expenditure is paid.	
	Personal Assistance Services, Amount of					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
311	VR Funds Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in their IPEs and have already been placed in an employment	
									setting.	
									Report at the time the expenditure is paid.	
	Personal Assistance Services, Amount of					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
312	SE Funds Expended for Service (Title VI)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXX
	Personal Assistance Services, Service									
313	Provided by Comparable Services and Benefits Providers	INT 1	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by comparable services and benefits providers.	1 = Service was provided in whole or part by comparable services and benefits
313	bellelits Floviders	IIVI I	140	NO		Liements	Occurrence	ies	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best	
									describes the service providers who provided the individual with a comparable service or benefit.	
									with a comparable service of benefit.	
	Personal Assistance Services, Comparable			Modified list		Other Service Data	Upon		Leave blank if service was not provided by a comparable	
314	Services and Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									Consultation and other services provided to conduct market	
									analyses, to develop business plans, and to provide resources to individuals in the pursuit of self-employment,	
									telecommuting and small business operation outcomes.	
	Technical Assistance Services Including						l		Report at the time the service is provided.	
315	Self-Employment, Service Provided by VR Agency Staff (in-house)	INT 1	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
515	rigeries stari (iii riouse)		110			Liements	occurrence	103		2 Service was provided in whole of pareby viragency stain
									Consultation and other services provided to conduct market analyses, to develop business plans, and to provide	
									resources to individuals in the pursuit of self-employment,	
									telecommuting and small business operation outcomes.	
	Technical Assistance Services Including								Report at the time the service is provided.	
	Self-Employment, Service Provided					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
316	through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									L	
									If the service was provided in whole or part through purchase by the VR agency, the Purchased Service Provider	
									Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
	Technical Assistance Services Including Self-Employment, Purchased Service					Other Service Data	Upon		Leave blank if service was not provided through purchase by	2 = Private CRP 3 =Other Public Service Provider
317	Provider Type	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	4 = Other Private Service Provider
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not	
									include unliquidated obligations or encumbrances.	
									Report at the time the expenditure is paid.	
	Technical Assistance Services Including									
318	Self-Employment, Amount of VR Funds Expended for Service (Title I)	INT 6	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxxx
210	Expended for Service (Title I)	11141 0	INO	LINO		Liements	Occurrence	162	viv agency.	//////

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Report the quarterly Supported Employment Services	
									program expenditures for the purchased service. Recipients	
									of these funds must have a supported employment goal in	
									their IPEs and have already been placed in an employment setting.	
									setting.	
									Report at the time the expenditure is paid.	
	Technical Assistance Services Including									
	Self-Employment, Amount of SE Funds Expended for Service (Title VI)	INT 6	l.,_			Other Service Data	Upon	v	Leave blank if service was not provided through purchase by	lxxxxxx
319	' '	INI 6	No	No		Elements	Occurrence	res	VR agency.	XXXXX
	Technical Assistance Services Including Self-Employment, Service Provided by									
	Comparable Services and Benefits					Other Service Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
	Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual	
									with a comparable service or benefit.	
	Technical Assistance Services Including								, and the second second second second second second second second second second second second second second se	
	Self-Employment, Comparable Services			Modified list		Other Service Data	Upon		Leave blank if service was not provided by a comparable	
321	and Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
									Services for individuals who cannot read print because of	
									blindness which include: reading aloud, transcription of	
									printed information into Braille or sound recordings if the individual requests such transcription.	
									muniduai requests such transcription.	
									Report at the time the service is provided.	
	Reader Services, Service Provided by VR					Other Service Data	Upon			
322	Agency Staff (in-house)	INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Services for individuals who cannot read print because of	
									blindness which include: reading aloud, transcription of	
									printed information into Braille or sound recordings if the	
									individual requests such transcription.	
									Report at the time the service is provided.	
									report at the time the service is provided.	
	Reader Services, Service Provided					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
323	through VR Agency Purchase	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through	
									purchase by the VR agency, the Purchased Service Provider Type must be reported. For each service category, report the	
									code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP)
									. ,	2 = Private CRP
	Reader Services, Purchased Service					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
324	Provider Type	INT 1	No	No		Elements	Occurrence	Yes	VR agency.	4 =Other Private Service Provider
									Report the quarterly VR program expenditures for the	
									purchased service. Expenditures may include non-Federal	
									share and VR program Federal funds, including program	
									income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.	
									meiade amiquidated obligations of effcumbrances.	
									Report at the time the expenditure is paid.	
	Reader Services, Amount of VR Funds		l	l		Other Service Data	Upon	l	Leave blank if service was not provided through purchase by	
325	Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx

			Multiple					Updateable		
Element Number	Florent News	Data Tura	Values Allowed	Channa	PIRL Element	Damant at	Report	(Y/N) after initial reporting	Definitions on looks which	Code Values
Number	Element Name	Data Type	Allowed	Change	PIKL Element	Report at	Report	Initial reporting	Definitions or Instructions  Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.	Lode values
									Report at the time the expenditure is paid.	
326	Reader Services, Amount of SE Funds Expended for Service (Title VI)	INT 6	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxx
327	Reader Services, Service Provided by Comparable Services and Benefits Providers	INT 1	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by comparable services and benefits providers.	1 = Service was provided in whole or part by comparable services and benefits providers
									Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.	
328	Reader Services, Comparable Services and Benefits Provider Type	VARCHAR 8	Yes	Modified list of choices		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by a comparable service or benefit	See Appendix 5 for a list of comparable benefits providers
									Sign language or oral interpretation services for individuals who are deaf or hard of hearing and tactile interpretation services for individuals who are deaf-blind.	
	Interpreter Services, Service Provided by					Other Service Data	Upon		Report at the time the service is provided.	
329	VR Agency Staff (in-house)	INT 1	No	No		Elements	Occurrence	Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
						Other Carrier Day			Sign language or oral interpretation services for individuals who are deaf or hard of hearing and tactile interpretation services for individuals who are deaf-blind.  Report at the time the service is provided.	
330	Interpreter Services, Service Provided through VR Agency Purchase	INT 1	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
									If the service was provided in whole or part through purchase by the VR agency, the Purchased Service Provider Type must be reported. For each service category, report the code value that best describes the primary service provider.	1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP
331	Interpreter Services, Purchased Service Provider Type	INT 1	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	3 =Other Public Service Provider 4 =Other Private Service Provider
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances.  Report at the time the expenditure is paid.	
332	Interpreter Services, Amount of VR Funds Expended for Service (Title I)	INT 6	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	xxxxxx
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.  Report at the time the expenditure is paid.	
333	Interpreter Services, Amount of SE Funds Expended for Service (Title VI)	INT 6	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	)XXXXXX

			Multiple					Updateable		
Element			Values	-				(Y/N) after		
Number	Element Name Interpreter Services, Service Provided by	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
	Comparable Services and Benefits					Other Service Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
334	Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.	providers
									Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.	
	Interpreter Services, Comparable Services			Modified list		Other Service Data	Upon		Leave blank if service was not provided by a comparable	
335	and Benefits Provider Type	VARCHAR 8	Yes	of choices		Elements	Occurrence	Yes	service or benefit	See Appendix 5 for a list of comparable benefits providers
							Upon		Use this category ONLY for other VR services that cannot be recorded elsewhere. Include in this category such services as the provision of funds for occupational licenses, tools and equipment, initial stocks and supplies.  Report at the time the service is provided.	
336	Other Services, Service Provided by VR Agency Staff (in-house)	INT 1	No	No		Other Service Data Elements		Yes	Leave blank if service was not provided by VR agency staff.	1 = Service was provided in whole or part by VR agency staff
									Use this category ONLY for other VR services that cannot be recorded elsewhere. Include in this category such services as the provision of funds for occupational licenses, tools and equipment, initial stocks and supplies.  Report at the time the service is provided.	
									Report at the time the service is provided.	
337	Other Services, Service Provided through VR Agency Purchase	INT 1	No	No		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided through purchase by VR agency.	1 = Service was provided in whole or part through purchase by the VR agency
	Other Services, Purchased Service					Other Service Data	Upon			1 = Public Community Rehabilitation Program (CRP) 2 = Private CRP 3 = Other Public Service Provider
338	Provider Type	INT 1	No	No		Elements		Yes	VR agency.	4 =Other Private Service Provider
									Report the quarterly VR program expenditures for the purchased service. Expenditures may include non-Federal share and VR program Federal funds, including program income, used to purchase the service. Expenditures do not include unliquidated obligations or encumbrances. Report at the time the expenditure is paid.	
	Other Services, Amount of VR Funds					Other Service Data	Upon		Leave blank if service was not provided through purchase by	
339	Expended for Service (Title I)	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	xxxxxx
									Report the quarterly Supported Employment Services program expenditures for the purchased service. Recipients of these funds must have a supported employment goal in their IPEs and have already been placed in an employment setting.	
									Report at the time the expenditure is paid.	
240	Other Services, Amount of SE Funds	INT C	No	No		Other Service Data	Upon	Vos	Leave blank if service was not provided through purchase by	
340	Expended for Service (Title VI) Other Services, Service Provided by	INT 6	No	No		Elements	Occurrence	Yes	VR agency.	XXXXXXX
	Comparable Services and Benefits					Other Service Data	Upon		Leave blank if service was not provided by comparable	1 = Service was provided in whole or part by comparable services and benefits
341	Providers	INT 1	No	No		Elements	Occurrence	Yes	services and benefits providers.  Report up to three codes, separated by semicolons, that best describes the service providers who provided the individual with a comparable service or benefit.	providers
342	Other Services, Comparable Services and Benefits Provider Type	VARCHAR 8	Yes	Modified list of choices		Other Service Data Elements	Upon Occurrence	Yes	Leave blank if service was not provided by a comparable service or benefit	See Appendix 5 for a list of comparable benefits providers

			Multiple					Updateable		
Element			Values					(Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
									Record the most recent date the participant, who received	
									instruction below the postsecondary education level, achieved at least one EFL.	
									acticved defeate one El E.	
									The date must be verifiable through supporting	
									documentation	
343	Measurable Skill Gain: Educational Functional Level (EFL)	DATE	No	No	1806	Measurable Skill Gain Data Elements	Upon	Yes	Leave blank if this data element does not apply to the participant.	YYYYMMDD
343	runctional Level (Ert.)	DATE	INO	NO	1800	Gain Data Lienients	Occurrence	res	participant.	TTTTWINDU
									Report the date that the individual attained a secondary	
				Modified reporting		Measurable Skill			school diploma or its recognized equivalent.	
344	Measurable Skill Gain: Secondary	DATE	No	instructions	1808		Upon Occurrence	Yes	Leave blank if this data element does not apply to individual.	YYYYMMDD
344	Weasurable Skill Galli. Secondary	DATE	140	mod detions	1000	Guin Duta Elements	Occurrence	103	Ecuve blank it this data element does not apply to murridual.	TTTMMDD
									Secondary: Report the most recent date of the individual's	
									transcript or report card showing the individual is achieving the policies for academic standards.	
									the policies for academic standards.	
									Postsecondary: Report the date of the individual's transcript	
									or report card showing a sufficient number of credit hours	
									have been completed and the individual is achieving the	
									policies for academic standards.	
									The date must be verifiable through supporting	
				Modified					documentation	
				name and						
	Measurable Skill Gain: Secondary or			reporting		Measurable Skill	Upon		Leave blank if this data element does not apply to the	
345	Postsecondary Transcript/Report Card	DATE	No	instructions	1807	Gain Data Elements	Occurrence	Yes	individual.	YYYYMMDD
									Record the most recent date that the individual achieved a	
									satisfactory or better progress report toward established	
									milestones from an employer/training provider who is	
									providing training (e.g., completion of on-the-job training	
									(OJT), completion of one year of a registered apprenticeship program, etc.).	
									program, etc.).	
									The date must be verifiable through supporting	
									documentation	
246	Measurable Skill Gain: Training Milestone	DATE		 	1809	Measurable Skill Gain Data Elements	Upon	V	Leave blank if this data element does not apply to the individual.	YYYYMMDD
346	Measurable Skill Gain: Training Milestone	DATE	No	No	1809	Gain Data Elements	Occurrence	Yes	individual.	TTTTMINIDO
									Record the most recent date the individual successfully	
									completed an exam that is required for a particular	
									occupation, or progress in attaining technical or	
									occupational skills as evidenced by trade-related benchmarks such as knowledge-based exams.	
									seriormanio sacri da kilowicuge buacu exuma.	
									The date must be verifiable through supporting	
									documentation	
							<b>.</b>		i i i i i i i i i i i i i i i i i i i	
347	Measurable Skill Gain: Skills Progression	DATE	No	No	1810	Measurable Skill Gain Data Elements	Upon Occurrence	Yes	Leave blank if this data element does not apply to the individual.	YYYYMMDD
347	INICASALIADIE SKIII GAIII: SKIIIS Progression	DATE	140	140	1010	Sam Data Elements	occurrence	169		TTTWWWDD
									Report the date when the individual started in the occupation related to their IPE goal.	
									seemparent related to their in L gour.	
	Start Date of Employment in Primary					Employment	Upon		The date must be verifiable through supporting	
350	Occupation	DATE	No	No		Outcome	Occurrence	No	documentation	YYYYMMDD
									Report the date the individual exited from the VR or SE	
									program consistent with the requirements in the regulations.	
									Leave blank if this data element does not apply to the	
									individual.	
l	<u> </u>		L	l	l		Upon		The date must be verifiable through supporting	
353	Date of Exit	DATE	No	No	901	Exit Data Elements	Occurrence	No	documentation.	YYYYMMDD

E1			Multiple Values					Updateable		
Element Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	(Y/N) after initial reporting	Definitions or Instructions	Code Values
354	Type of Exit  Reason for Program Exit	INT 1	No No	Modified list of choices  Modified list of choices	PIRL Element	Exit Data Elements	Upon Occurrence	No	Report from which stage in the VR process an individual exited the program.  Report the code that identifies the reason the individual exited. Data are reported in the same quarter as the Date of Exit (353) occurs.  The date must be verifiable through supporting documentation.	1 = Individual exited during or after a trial work experience 2 = Individual exited after eligibility, but from an order of selection waiting list 3 = Individual exited after eligibility, but prior to a signed IPE 4 = Individual exited after an signed IPE without an employment outcome 5 = Individual exited after an signed IPE in noncompetitive and/or nonintegrated employment 6 = Individual exited after an IPE in competitive and integrated employment 7 = Individual exited as an applicant after being determined ineligible for VR services 0 = Individual exited as an applicant, prior to eligibility determination or trial work  Valid values listed in Appendix 6
356	Employment Outcome at Exit	INT 1	No	Modified list		Exit Data Elements	Upon Occurrence	No		1 = Competitive Integrated Employment 2 = Self-Employment 3 = Randolph-Sheppard BEP 4 = State Agency Managed BEP 5 = Supported Employment in Competitive Integrated Employment 7 = Homemaker
357	Primary Occupation at Exit	INT 6	No	Modified reporting instructions		Exit Data Elements	Upon Occurrence	No	For an individual who is employed, enter the current 2018 Standard Occupational Classification (SOC) code that best describes the individual's occupation from which he/she derives the majority of their hourly earnings.  Special Codes for Randolph-Sheppard Participants: 899999 Randolph-Sheppard Vending Facility Clerk: Refers to persons employed as clerks, sales persons, or helpers in a vending facility operated under the Randolph-Sheppard Vending Facility operated under the Randolph-Sheppard Vending Facility Program. Use this special code even though these occupations are classifiable.	xxxxx
							Upon		Report individual's hourly wage (rounded to the nearest cent) earned at the time of the IPE.  The date must be verifiable through supporting documentation	
359	Hourly Wage at Exit	DECIMAL 5, 2	No	No		Exit Data Elements	Occurrence Upon	No	Report 0 if individual had no earnings at the time of IPE.  Report the number of hours the individual worked for earnings in a typical week at the time of the IPE.	XXXXX
360	Hours Worked in a Week at Exit	INT 2	No	No		Exit Data Elements		No	Report 0 if individual was unemployed.	xx
xx	Monthly Public Support at Exit	VARCHAR 7	Yes	New element number		Exit Data Elements	Upon Occurrence	No	Report the individual's public support at exit. If the individual receives more than one type of public support, use a semicolon between each type.	Individual does not receive public support     I = Individual receives Social Security Disability Insurance (SSDI)     I = Individual receives Supplemental Security Income (SSI)     I = Individual receives Temporary Assistance for Needy Families (TANF)     Individual receives Temporary Assistance for Needy Families

			Multiple					Updateable		
Element Number	Element Name	Data Type	Values Allowed	Change	PIRL Element	Report at	Report	(Y/N) after	Definitions or Instructions	Code Values
Number	Licinent Name	Data Type	Anowed	Change	PIRE Element	Report at	Report	muarreporting	Deminions of instructions	0 = Applicant does not have medical insurance coverage 1 = Applicant has Medicaid 2 = Applicant has Medicaire 3 = Applicant is receiving benefits through the State or Federal Affordable Care Act Exchange at the time of application 4 = Applicant has public insurance outside of Medicare, Medicaid, or the Affordable
xx	Medical Insurance Coverage at Exit	VARCHAR 5	Yes	New element number		Exit Data Elements	Upon Occurrence	No	insurance may be provided	4 = Applicant has pulse insurance outside of Medicare, Medicald, or the Affordable Care Act exchange 5 = Applicant has private insurance through employer 6 = Applicant is not eligible for private insurance through a current employer, but will be eligible for private insurance after a certain period of employment 7 = Applicant has private insurance through other means
376	Date Enrolled in Post-Exit Education or Training Program Leading to a Recognized Postsecondary Credential	DATE	No	No	1406	Post-Exit Data Elements	Upon Occurrence	No	This element only applies to participants who exited secondary education and obtained a secondary school diploma or its equivalency.  Leave blank if this data element does not apply to individual.	YYYYMMDD
377	Date of Attainment of Post-Exit Recognized Credential	DATE	No	No		Post-Exit Data Elements	Upon Occurrence	No.	Report the post-exit date on which the individual attained a recognized credential.  Leave blank if this data element does not apply to individual.	NOWALLIED.
377	Type of Recognized Credential Attained Post-Exit	INT 1	No	No		Post-Exit Data Elements	Upon Occurrence		Report the type of recognized diploma, degree, or credential.  The date must be verifiable through supporting documentation.  Leave blank if this data element does not apply to individual.	1 = Secondary Diploma or Equivalency 2 = Associates Diploma/Degree 3 = Bachelors Diploma/Degree 4 = Graduate/Post Graduate Degree 5 = Occupational Licensure 6 = Occupational Certificate 7 = Occupational Certification 8 = Other Recognized Credential
	Employment - First Quarter After Exit	INT 1	No	No	1600	Post-Exit Data Elements	Upon Occurrence		The employment data for the first completed quarter after exit is ONLY required when necessary to document credential measure attainment for students who attained a secondary education credential.  Employment must be verifiable through supporting documentation.	1 = Individual is in unsubsidized employment, not including Registered Apprenticeship, the military, or competitive integrated employment under VR 2 = Individual is in a Registered Apprenticeship 3 = Individual is in the military 4 = Individual is in the military 9 = Individual hot exited but employment information is not yet available 0 = Individual not employed in the first quarter after exit quarter
383	Employment - Second Quarter After Exit Quarter	INT 1	No	No	1602	Post-Exit Data Elements	Upon Occurrence	No	Employment must be verifiable through supporting documentation.	1 = Individual is in unsubsidized employment, not including Registered Apprenticeship, the military, or competitive integrated employment under VR 2 = Individual is in a Registered Apprenticeship 3 = Individual is in the military 4 = Individual is in competitive integrated employment (VR only) 9 = Individual has exited but employment information is not yet available 0 = Individual not employed in the first quarter after exit quarter
385	Quarterly Wages - Second Quarter After Exit Quarter	DECIMAL 8, 2	No	No	1704	Post-Exit Data Elements	Upon Occurrence	No	Record the total wages, including cents, earned, from the employment outcome consistent with the employment goal on an individual's IPE at the time the individual exited, during the second quarter after the quarter of exit. These earnings are before payroll deductions of Federal, State and local income taxes and Social Security payroll tax.  Wages must be verifiable through supporting documentation.	XXXXXXXX
386	Employment - Third Quarter After Exit Quarter	INT 1	No	No	1604	Post-Exit Data Elements	Upon Occurrence	No	The employment data for the third completed quarter after exit is OMLY required when necessary to document credential measure attainment for students who attained a secondary education credential.  Employment must be verifiable through supporting documentation.	1 = Individual is in unsubsidized employment, not including Registered Apprenticeship, the military, or competitive integrated employment under VR. 2 = Individual is in a Registered Apprenticeship. 3 = Individual is in the military. 4 = Individual is in competitive integrated employment (VR only). 9 = Individual has exited but employment information is not yet available. 0 = Individual not employed in the first quarter after exit

Element			Multiple Values					Updateable (Y/N) after		
Number	Element Name	Data Type	Allowed	Change	PIRL Element	Report at	Report	initial reporting	Definitions or Instructions	Code Values
	Employment - Fourth Quarter After Exit					Post-Exit Data	Upon			1 = Individual is in unsubsidized employment, not including Registered Apprenticeship, the military, or competitive integrated employment under VR. 2 = Individual is in a Registered Apprenticeship. 3 = Individual is in the military. 4 = Individual is in competitive integrated employment (VR only). 9 = Individual has exited but employment information is not yet available.
1			l	l		1	1 '			· · ·
389	Quarter	INT 1	No	No	1606	Elements	Occurrence	NO	documentation.	0 = Individual not employed in the first quarter after exit
392	Retention with the Same Employer in the Second Quarter and the Fourth Quarter — Fourth Quarter After Exit Quarter	INT 1	No	No	1618	Post-Exit Data Elements	Upon Occurrence			1 = Individual's employer in the second quarter after exit matches the employer in the fourth quarter after exit.  0 = Individual is not employed in the second or fourth quarters after exit, or the employer in the second quarter after exit does not match the employer in the fourth quarter after exit.

El		
Element	Flament Nama	Change
Number 1	Program Year	Change No
2	Program Year Quarter	INO
3	Date Report Submitted	Deleted
4	Agency Code	No
5	Unique Identifier	Modified Reporting Instruction
6	1 · · · · ·	:
7	Social Security Number	No
	Date of Application Date of Birth	No
8 9		No No
10	Sex	INO
11	American Indian / Alaska Native	No
12	Asian Black / African American	lNo
13	Native Hawaiian / Other Pacific Islander	· · · ·
		No
14	White	No
15	Ethnicity: Hispanic / Latino	No
16	Veteran	No
17	Living Arrangement	Deleted
18	State Postal Code of Residence	No
19	County FIPS Code	No
20	ZIP Code	No
21	Source of Referral	Modified list of choices
22	Student with a Disability	No
23	SSDI at Application	Deleted
	SSI for the Aged, Blind, or Disabled at	
24	Application	Deleted
	Temporary Assistance for Needy Families	
25	at Application	Deleted
26	General Assistance at Application	Deleted
27	N	
27	Veterans' Disability Benefits at Application	Deleted
20		
28	Workers' Compensation at Application Unemployment Compensation at	Deleted
20	1	
29	Application	Deleted
20	Division Company of Company of Analysis and	Baland
30	Primary Source of Support at Application	Deleted
31	Medicaid at Application	Deleted
32	Medicare at Application	Deleted
	State or Federal Affordable Care Act	Deleted
33	Exchange at Application Public Insurance from Other Sources at	Deleted
]		Deleted
34	Application  Private Insurance through Employer at	Deleted
25	• • •	Deleted
35	Application	Deleted
	Not Vot Eligible for Private Income	
]	Not Yet Eligible for Private Insurance	Deleted
36	through Employer at Application	Deleted
	Private Insurance through Other Means at	Deleted
37	Application	Deleted
38	Date of Eligibility Determination	No
20	Eligibility Determination Establish	Modified definition
39	Eligibility Determination Extension	Modified definition
40	Date of Placement on OOS Waiting List	No
41		No
	Date of Exit from OOS Waiting List	
42 43	Individual with a Disability	No No
43	Primary Disability	INO

Element		
Number	Element Name	Change
44	Secondary Disability	No
45	Significance of Disability	No
-		
46	Start Date of Trial Work Experience	No
47	End Date of Trial Work Experience	No
48	Date of Most Recent or Amended IPE	Deleted
	Supported Employment Goal on Current	
49	IPE . ,	No
50	Employment at IPE	No
51	Primary Occupation at IPE	Modified reporting instructions
52	Hourly Wage at IPE	No
53	Hours Worked in a Week at IPE	No
54	Adult	Modified definition and list of choices
55	Adult Education	Modified definition
56	Dislocated Worker	Modified definition and list of choices
57	Job Corps	Modified definition
58	Vocational Rehabilitation	Modified reporting instructions
59	Wagner-Peyser Employment Service	Modified definition
60	Youth	Modified definition and list of choices
61	Youth Build	No
62	Long-Term Unemployed	Modified list of choices
63	Exhausting TANF Within 2 Years	Modified list of choices
64	Foster Care Youth	Modified list of choices
65	Homeless Individual, Homeless Children and Youths, or Runaway Youth	Modified list of choices
66	Ex-Offender	No
67	Low Income	Modified list of choices
68	English Language Learner	Modified list of choices
	English Earlyauge Ecurior	Widamica list of choices
69	Basic Skills Deficient/Low Levels of Literacy	Modified list of choices
70	Cultural Barriers	No
71	Single Parent	No
72	Displaced Homemaker	Modified list of choices
73	Migrant and Seasonal Farmworker	Modified list of choices
,,,	State Definition for Age of Students with	inicalited list of differen
74	Disabilities	No
75	School Status	Deleted
,,,	Como o catas	Deleted
76	Highest Educational Level Completed	Deleted
70	Trigitest Educational Ecycl completed	Deleted
	Highest Elementary or Secondary School	
77	Grade Completed at Program Entry	Modified element title
78	Enrolled in Secondary Education	No
, 0	Date Received Special Education	
79	Certificate of Completion	No
13	Enrolled in State Adult Secondary School at	INO
80	•	Deleted
80	the High ASE Level	peieteu
01	Date Attained Secondary S. J. J. Div. J.	No.
81	Date Attained Secondary School Diploma	No
	Date Attained Recognized Secondary	NA - difficial allows a vivil
82	School Equivalency	Modified element title

Element		
Number	Element Name	Change
Number	Enrolled in Postsecondary or Graduate	Change
83	Education	Deleted
63	Lucation	Deleted
	Enrolled in Postsecondary Education or	
84	career or technical training	Modified list of choices
04	career or technical training	I would list of choices
	Date Enrolled During Program	
	Participation in an Education or Training	
	Program Leading to a Recognized	
O.F.	Postsecondary Credential or Employment	No
85	Postsecondary Credential of Employment	No
	Completed Some Postsecondary	
96		No
86	Education, No Degree or Certificate	No
87	Date Attained Associate Degree	No
88	Date Attained Bachelor's Degree	No No
90	Date Attained Master's Degree	No
30	Date Attained Graduate Degree Enrolled in a Career or Technical Training	No
	Program, Not Leading to a Recognized	
01	Credential	Deleted
91		Deleted
	Enrolled in a Career or Technical Training	
00	Program, Leading to a Recognized	Deleted
92	Credential  Date Attained Vocational/Technical	Deleted
02		N <sub>0</sub>
93	License	No
	Data Attained Manational/Task size	
0.4	Date Attained Vocational/Technical	No.
94	Certificate or Certification	No
95	Data Attained Other Recognized Credential	Madified alament title
33	Date Attained Other Recognized Credential Start Date of Pre-Employment Transition	I would element title
96	Services	No
30	Job Exploration Counseling, Service	140
97	Provided by VR Agency Staff	No
31	Frovided by VK Agency Staff	
	Job Exploration Counseling, Service	
98	Provided through VR Agency Purchase	No
56	Job Exploration Counseling, Purchased	140
99	Service Provider Type	No
<i></i>	Jervice Frovider Type	
	Job Exploration Counseling, VR Program	
100	Expenditure for Purchased Service	Modified reporting instructions
100	Service Provided by Comparable Services	mounica reporting matractions
101	and Benefits Providers	Deleted
101	Comparable Services and Benefits Provider	Deletted
102	Type	Deleted
102	Work Based Learning Experience, Service	Deletica
103	Provided by VR Agency Staff	No
100	Trovided by VICABETICY Staff	
	Work Based Learning Experience, Service	
104	Provided through VR Agency Purchase	No
107	Work Based Learning Experience,	
105	Purchased Service Provider Type	No
100	Work Based Learning Experience, VR	
	Program Expenditure for Purchased	
106	Service	Modified reporting instructions
100	Detaile	Informed reporting instructions

Element		
Number	Element Name	Change
Number	Service Provided by Comparable Services	Change
107	and Benefits Providers	Deleted
107	Comparable Services and Benefits Provider	Defeted
108	Туре	Deleted
100	1,450	Defected
	Counseling on Enrollment Opportunities,	
109	Service Provided by VR Agency Staff	No
	Counseling on Enrollment Opportunities,	
	Service Provided through VR Agency	
110	Purchase	No
	Counseling on Enrollment Opportunities,	
111	Purchased Service Provider Type	No
	Counseling on Enrollment Opportunities,	
	VR Program Expenditure for Purchased	
112	Service	Modified reporting instructions
	Service Provided by Comparable Services	, j
113	and Benefits Providers	Deleted
	Comparable Services and Benefits Provider	
114	Туре	Deleted
	Workplace Readiness Training, Service	
115	Provided by VR Agency Staff	No
	Workplace Readiness Trainings, Service	
116	Provided through VR Agency Purchase	No
	Workplace Readiness Training, Purchased	
117	Service Provider Type	No
	Workplace Readiness Training, VR	
	Program Expenditure for Purchased	
118	Service	Modified reporting instructions
	Service Provided by Comparable Services	
119	and Benefits Providers	Deleted
	Comparable Services and Benefits Provider	
120	Туре	Deleted
	Instruction in Self Advocacy, Service	
121	Provided by VR Agency Staff	No
	Instruction in Self Advocacy, Service	
122	Provided through VR Agency Purchase	No
	Instruction in Self Advocacy, Purchased	
123	Service Provider Type	No
	Instruction in Self Advocacy, VR Program	
124	Expenditure for Purchased Service	Modified reporting instructions
	Service Provided by Comparable Services	
125	and Benefits Providers	Deleted
	Comparable Services and Benefits Provider	<u>[</u>
126	Туре	Deleted
	Start Date of Initial VR Service on or After	
127	IPE	No
128	Date of Most Recent Career Service	No
	Graduate College or University, Service	
129	Provided by VR Agency Staff	Deleted

Element		
Number	Element Name	Change
IVAIIIDEI	Element Name	Change
	Graduate College or University, Service	
130	Provided through VR Agency Purchase	No
100	Graduate College or University, Purchased	
131	Service Provider Type	No
131	Service Frovider Type	
	Graduate College or University, Amount of	
132	VR Title I Funds Expended	No
132	VICTIBLE IT diffus Experiacu	
	Graduate College or University, Amount of	
133	SE Title VI Funds Expended	No
133	Graduate College or University,	
134	Comparable Service Provider	No
154	Graduate College or University,	NO
125		
135	Comparable Service Provider Type	Modified list of choices
	Favor Vana Callana and Indianaita Taninina	
126	Four-Year College or University Training,	Deleted
136	Service Provided by VR Agency Staff	Deleted
	Four-Year College or University Training,	
	Service Provided Through VR Agency	]
137	Purchase	No
	Four-Year College or University Training,	
138	Purchased Service Provider Type	No
	Four-Year College or University Training,	
	Amount of VR Funds Expended for Service	
139	(Title I)	No
	Four-Year College or University Training,	
	Amount of SE Funds Expended for Service	
140	(Title VI)	No
	Four-Year College or University Training,	
	Service Provided by Comparable Services	
141	and Benefits Providers	No
	Four-Year College or University Training,	
	Comparable Services and Benefits Provider	
142	Туре	Modified list of choices
	Junior or Community College Training,	
143	Service Provided by VR Agency Staff	Deleted
	Junior or Community College Training,	
	Service Provided Through VR Agency	
144	Purchase	No
T		
	Junior or Community College Training,	
145	Purchased Service Provider Type	No
1-73	Four-Year College or University Training,	
	Amount of VR Funds Expended for Service	
146	(Title I)	No
140	Four-Year College or University Training,	No
4.47	Amount of SE Funds Expended for Service	<b>.</b>
147	(Title VI)	No
	Favor Vana Calle de la Livie d	
	Four-Year College or University Training,	
	Service Provided by Comparable Services	<u> </u>
148	and Benefits Providers	No

Element		
Number	Element Name	Change
	Four-Year College or University Training,	
	Comparable Services and Benefits Provider	
149	Туре	Modified list of choices
	Occupational or Vocational Training,	
	Service Provided by VR Agency Staff (in-	
150	house)	No
	Occupational or Vocational Training,	
	Service Provided Through VR Agency	
151	Purchase	No
	L	
	Occupational or Vocational Training,	
152	Purchased Service Provider Type	No
	Occupational or Vocational Training,	
450	Amount of VR Funds Expended for Service	
153	(Title I) Occupational or Vocational Training,	No
	1 .	
1	Amount of SE Funds Expended for Service	NI-
154	(Title VI)	No
	Occupational or Vocational Training	
	Occupational or Vocational Training, Service Provided by Comparable Services	
155	and Benefits Providers	No
133	Occupational or Vocational Training,	INO I
	Comparable Services and Benefits Provider	
156	Type	Modified list of choices
130	Туре	Woulfied list of choices
	On The Job Training, Service Provided by	
157	VR Agency Staff (in-house)	No
	thingshop starr (in nears)	
	On The Job Training, Service Provided	
158	Through VR Agency Purchase	No
	On The Job Training, Purchased Service	
159	Provider Type	No
	On The Job Training, Amount of VR Funds	
160	Expended for Service (Title I)	No
	On The Job Training, Amount of SE Funds	
161	Expended for Service (Title VI)	No
	On The Job Training, Service Provided by	
	Comparable Services and Benefits	
162	Providers	No
	On The Job Training, Comparable Services	
163	and Benefits Provider Type	Modified list of choices
	Registered Apprenticeship Training,	
	Service Provided Through VR Agency	
164	Purchase	No
	Registered Apprenticeship Training,	
165	Purchased Service Provider Type	No
	Registered Apprenticeship Training,	
	Amount of VR Funds Expended for Service	
166	(Title I)	No
	Registered Apprenticeship Training,	
	Amount of SE Funds Expended for Service	[
167	(Title VI)	No

Element		
Number	Element Name	Change
Number	Element Name	Change
	Registered Apprenticeship Training,	
	Service Provided by Comparable Services	
168	and Benefits Providers	No
	Registered Apprenticeship Training,	
	Comparable Services and Benefits Provider	
169	Туре	Modified list of choices
	Basic Academic Remedial or Literacy	
	Training, Service Provided by VR Agency	
170	Staff (in-house)	No
	Basic Academic Remedial or Literacy	
	Training, Service Provided Through VR	
171	Agency Purchase	No
	Basic Academic Remedial or Literacy	
172	Training, Purchased Service Provider Type	No
	Basic Academic Remedial or Literacy	
	Training, Amount of VR Funds Expended	
173	for Service (Title I)	No
	Basic Academic Remedial or Literacy	
	Training, Amount of SE Funds Expended	
174	for Service (Title VI)	No
	Davis Assadamia Davas dial antihanas	
	Basic Academic Remedial or Literacy	
175	Training, Service Provided by Comparable	NI-
175	Services and Benefits Providers	No
	Basic Academic Remedial or Literacy	
476	Training, Comparable Services and	A 1151 1 11 1 5 1 1 1
176	Benefits Provider Type	Modified list of choices
	Job Readiness Training, Service, Provided	
177	by VR Agency Staff (in-house)	No
1//	by VIV Agency Stan (III-nouse)	INO .
	Job Readiness Training, Service, Provided	
178	Through VR Agency Purchase	No
	Job Readiness Training, Service, Purchased	
179	Service Provider Type	No
	i i	
	Job Readiness Training, Service, Amount of	
180	VR Funds Expended for Service (Title I)	No
	Job Readiness Training, Service, Amount of	
181	SE Funds Expended for Service (Title VI)	No
	Job Readiness Training, Service Provided	
	by Comparable Services and Benefits	
182	Providers	No
	l.,	
	Job Readiness Training, Comparable	
183	Services and Benefits Provider Type	Modified list of choices
	Disability Palated Chills Tradel and Cont	
104	Disability Related Skills Training, Service	No
184	Provided by VR Agency Staff (in-house)	No
	Disability Related Skills Training, Service	
185	Provided Through VR Agency Purchase	No
-03	I Toviaca Tillough VI Agency Luichase	110

Element		
Number	Element Name	Change
Namber	Disability Related Skills Training, Purchased	
186	Service Provider Type	No
100	Service Frovider Type	
	Disability Related Skills Training, Amount	
187	of VR Funds Expended for Service (Title I)	No
107	or vict unus experided for Service (Title I)	140
	Disability Related Skills Training, Amount	
188	of SE Funds Expended for Service (Title VI)	No
100	Disability Related Skills Training, Service	NO
	_	
100	Provided by Comparable Services and	No
189	Benefits Providers	No
	Disability Related Skills Training,	
	Comparable Services and Benefits Provider	
190	Туре	Modified list of choices
	1	
	Miscellaneous Training, Service Provided	
191	by VR Agency Staff (in-house)	No
	Miscellaneous Training, Service Provided	
192	Through VR Agency Purchase	No
	Miscellaneous Training, Purchased Service	
193	Provider Type	No
	Miscellaneous Training, Amount of VR	
194	Funds Expended for Service (Title I)	No
	Miscellaneous Training, Amount of SE	
195	Funds Expended for Service (Title VI)	No
	Miscellaneous Training, Service Provided	
	by Comparable Services and Benefits	
196	Providers	No
	Miscellaneous Training, Comparable	
197	Services and Benefits Provider Type	Modified list of choices
	Randolph-Sheppard Entrepreneurial	
	Training, Service Provided by VR Agency	
198	Staff (in-house)	No
130	Starr (in riouse)	
	Randolph-Sheppard Entrepreneurial	
	Training, Service Provided Through VR	
199	Agency Purchase	No
199	Agency Furchase	No
	Randolph-Sheppard Entrepreneurial	
200	1 ' ' ' '	No
200	Training, Purchased Service Provider Type	No
	Pandolph Chappard Entragraphysic	
	Randolph-Sheppard Entrepreneurial	
201	Training, Amount of VR Funds Expended	N
201	for Service (Title I)	No
	Randolph-Sheppard Entrepreneurial	
	Training, Amount of SE Funds Expended	]
202	for Service (Title VI)	No

Element		
Number	Floment Name	Chango
Number	Element Name	Change
	Pandalah Shannard Entrantangurial	
	Randolph-Sheppard Entrepreneurial	
202	Training, Service Provided by Comparable	N.
203	Services and Benefits Providers	No
	Randolph-Sheppard Entrepreneurial	
	Training, Comparable Services and	
204	Benefits Provider Type	Modified list of choices
	L	
	Customized Training, Service Provided by	
205	VR Agency Staff (in-house)	No
	Customized Training, Service Provided	
206	Through VR Agency Purchase	No
	Customized Training, Purchased Service	
207	Provider Type	No
	Customized Training, Amount of VR Funds	
208	Expended for Service (Title I)	No
	Customized Training, Amount of SE Funds	
209	Expended for Service (Title VI)	No
	Customized Training, Service Provided by	
	Comparable Services and Benefits	
210	Providers	No
	Customized Training, Comparable Services	
211	and Benefits Provider Type	Modified list of choices
	Assessment, Service Provided by VR	
212	Agency Staff (in-house)	No
	Assessment, Service Provided Through VR	
213	Agency Purchase	No
	Assessment, Purchased Service Provider	
214	Type	No
	Assessment, Amount of VR Funds	
215	Expended for Service (Title I)	No
	Assessment, Amount of SE Funds	
216	Expended for Service (Title VI)	No
	Assessment, Service Provided by	
	Comparable Services and Benefits	
217	Providers	No
- <u>-</u> -	Assessment, Comparable Services and	
218	Benefits Provider Type	Modified list of choices
	Diagnosis and Treatment of Impairments,	
	Service Provided by VR Agency Staff (in-	
219	house)	No
	Diagnosis and Treatment of Impairments,	
	Service Provided Through VR Agency	
220	Purchase	No
220	i dicilase	
	Diagnosis and Treatment of Impairments,	
221	1	No
221	Purchased Service Provider Type	No
	Diagnosis and Treatment of Impairments,	
222	Amount of VR Funds Expended for Service	No
222	(Title I)	No

Element		
Number	Element Name	Change
Number	Diagnosis and Treatment of Impairments,	Change
	Amount of SE Funds Expended for Service	
223	(Title VI)	No
223	(Title VI)	INO
	Diagnosis and Treatment of Impairments,	
224	Service Provided by Comparable Services and Benefits Providers	No
224		No
	Diagnosis and Treatment of Impairments,	
	Comparable Services and Benefits Provider	I
225	Туре	Modified list of choices
	Vocational Rehabilitation Counseling and	
	Guidance, Service Provided by VR Agency	
226	Staff (in-house)	No
	Vocational Rehabilitation Counseling and	
	Guidance, Service Provided by Through VR	
227	Agency Purchase	No
	Vocational Rehabilitation Counseling and	
	Guidance, Purchased Service Provider	
228	Туре	No
	Vocational Rehabilitation Counseling and	
	Guidance, Amount of VR Funds Expended	
229	for Service (Title I)	No
	Vocational Rehabilitation Counseling and	
	Guidance, Amount of SE Funds Expended	
230	for Service (Title VI)	No
	Vocational Rehabilitation Counseling and	
	Guidance, Service Provided by	
	Comparable Services and Benefits	
231	Providers	No
	Vocational Rehabilitation Counseling and	
	Guidance, Comparable Services and	
232	Benefits Provider Type	Modified list of choices
	Job Search Assistance, Service Provided by	
233	VR Agency Staff (in-house)	No
	Job Search Assistance, Service Provided	
234	Through VR Agency Purchase	No
	Job Search Assistance, Purchased Service	
235	Provider Type	No
	Job Search Assistance, Amount of VR	
236	Funds Expended for Service (Title I)	No
	` '	
	Job Search Assistance, Amount of SE	
237	Funds Expended for Service (Title VI)	No
	Job Search Assistance, Service Provided by	
	Comparable Services and Benefits	
238	Providers	No
230	Job Search Assistance, Comparable	
239	Services and Benefits Provider Type	Modified list of choices
233	Dervices and benefits Frovider Type	INIOGINEU IIST OI CHOICES

Element		
Number	Element Name	Change
TUTTO	Job Placement Assistance, Service	John Je
	Provided by VR Job Placement Assistance,	
240	Agency Staff (in-house)	No
240	Agency Starr (III-nouse)	
	Job Placement Assistance, Service	
241	Provided Through VR Agency Purchase	No
	Job Placement Assistance, Purchased	
242	Service Provider Type	No
	Job Placement Assistance, Amount of VR	
243	Funds Expended for Service (Title I)	No
	Job Placement Assistance, Amount of SE	
244	Funds Expended for Service (Title VI)	No
	Job Placement Assistance, Service	
	Provided by Comparable Services and	
245	Benefits Providers	No
	Job Placement Assistance, Comparable	
246	Services and Benefits Provider Type	Modified list of choices
	Chart Tarre Joh Cupperts Comice Dravided	
247	Short Term Job Supports, Service Provided	No
247	by VR Agency Staff (in-house)	No
	Short Term Job Supports, Service Provided	
248	Through VR Agency Purchase	No
240	Short Term Job Supports, Purchased	
249	Service Provider Type	No
	os. noc i romas. Type	
	Short Term Job Supports, Amount of VR	
250	Funds Expended for Service (Title I)	No
	Short Term Job Supports, Amount of SE	
251	Funds Expended for Service (Title VI)	No
	Short Term Job Supports, Service Provided	
	by Comparable Services and Benefits	
252	Providers	No
	Short Term Job Supports, Comparable	
253	Services and Benefits Provider Type	Modified list of choices
	Currented Franksument Comitions Comition	
	Supported Employment Services, Service	
254	Provided by Supported Employment Services, VR Agency Staff (in-house)	No
234	Services, vn Agency Stan (III-nouse)	INU
	Supported Employment Services, Service	
255	Provided Through VR Agency Purchase	No
-55	Supported Employment Services,	
256	Purchased Service Provider Type	No
<i>-</i>		
	Supported Employment Services, Amount	
257	of VR Funds Expended for Service (Title I)	No
	, , , , , ,	
	Supported Employment Services, Amount	
258	of SE Funds Expended for Service (Title VI)	No
	•	•

Element		
Number	Element Name	Change
TTATTIBET	Supported Employment Services, Service	Change
	Provided by Comparable Services and	
259	Benefits Providers	No
233	Supported Employment Services,	
	Comparable Services and Benefits Provider	
260	Type	Modified list of choices
200	Туре	Wodified list of choices
	Information and Referral Services, Service	
261	Provided by VR Agency Staff (in-house)	No
201	Frovided by VK Agency Staff (III-flouse)	INO
	Information and Referral Services, Service	
262	Provided Through VR Agency Purchase	No
202	Information and Referral Services,	INO
263		No
203	Purchased Service Provider Type	INO
	Information and Referral Services, Amount	
264		No
264	of VR Funds Expended for Service (Title I)	No
	Information and Referral Consises Amount	
205	Information and Referral Services, Amount	No
265	of SE Funds Expended for Service (Title VI)	No
	Information and Referral Services, Service	
	Provided by Comparable Services and	
266	Benefits Providers	No
	Information and Referral Services,	
	Comparable Services and Benefits Provider	
267	Туре	Modified list of choices
	Benefits Counseling, Service Provided by	
268	VR Agency Staff (in-house)	No
	Benefits Counseling, Service Provided	
269	Through VR Agency Purchase	No
	Benefits Counseling, Purchased Service	
270	Provider Type	No
	Benefits Counseling, Amount of VR Funds	
271	Expended for Service (Title I)	No
	B 5: 0 1: 4	
.=.	Benefits Counseling, Amount of SE Funds	
272	Expended for Service (Title VI)	No
	Benefits Counseling, Service Provided by	
	Comparable Services and Benefits	
273	Providers	No
	Benefits Counseling, Comparable Services	
274	and Benefits Provider Type	Modified list of choices
	Customized Employment Services, Service	
275	Provided by VR Agency Staff (in-house)	No
	Customized Employment Services, Service	
276	Provided Through VR Agency Purchase	No
	Customized Employment Services,	
	In a share of Complete Dura dalay Trans	No
277	Purchased Service Provider Type	
277	Purchased Service Provider Type	110
277	Customized Employment Services, Amount	

Element		
Number	Element Name	Change
IVAIIIDEI	Element Name	Change
	Customized Employment Services, Amount	
279	of SE Funds Expended for Service (Title VI)	No
	Customized Employment Services, Service	
	Provided by Comparable Services and	
280	Benefits Providers	No
	Customized Employment Services,	
	Comparable Services and Benefits Provider	
281	Туре	Modified list of choices
	Extended Services, Service Provided by VR	
282	Agency Staff (in-house)	No
	Extended Services, Service Provided	
283	Through VR Agency Purchase	No
	Extended Services, Purchased Service	
284	Provider Type	No
	Extended Services, Amount of VR Funds	
285	Expended for Service (Title I)	No
	Extended Services, Amount of SE Funds	
286	Expended for Service (Title VI)	No
207	Other Service Data Elements, Service	<b>.</b>
287	Provided by VR Agency Staff (in-house)	No
	Other Service Data Elements, Service	
288	Provided Through VR Agency Purchase	No
200	Other Service Data Elements, Purchased	INO I
289	Service Provider Type	l <sub>No</sub>
203	Service Frovider Type	
	Other Service Data Elements, Amount of	
290	VR Funds Expended for Service (Title I)	No I
	Other Service Data Elements, Amount of	
291	SE Funds Expended for Service (Title VI)	No
	Other Service Data Elements, Service	
	Provided by Comparable Services and	
292	Benefits Providers	No
	Other Service Data Elements, Comparable	
293	Services and Benefits Provider Type	Modified list of choices
	Maintenance, Service Provided by VR	
294	Agency Staff (in-house)	No
	Maintenance, Service Provided Through	
295	VR Agency Purchase	No
	Maintenance, Purchased Service Provider	<u> </u>
296	Type	No
207	Maintenance, Amount of VR Funds	<u>                                     </u>
297	Expended for Service (Title I)	No
200	Maintenance, Amount of SE Funds	  No
298	Expended for Service (Title VI)  Maintenance, Service Provided by	No
	Comparable Services and Benefits	
299	Providers	I <sub>No</sub>
<u> </u>	Maintenance, Comparable Services and	No
300	Benefits Provider Type	Modified list of choices
300	penents riovider Type	iviouilled list of Choices

Element		
Number	Element Name	Change
Number	Element Name	Change
	Rehabilitation Technology, Service	
301	Provided by VR Agency Staff (in-house)	No
301	Trovided by VICAgency Starr (III House)	INO .
	Rehabilitation Technology, Service	
302	Provided Through VR Agency Purchase	No
-	Rehabilitation Technology, Purchased	
303	Service Provider Type	No
	7	
	Rehabilitation Technology, Amount of VR	
304	Funds Expended for Service (Title I)	No
	Rehabilitation Technology, Amount of SE	
305	Funds Expended for Service (Title VI)	No
	Rehabilitation Technology, Service	
	Provided by Comparable Services and	
306	Benefits Providers	No
	l	
	Rehabilitation Technology, Comparable	
307	Services and Benefits Provider Type	Modified list of choices
200	Personal Assistance Services, Service	
308	Provided by VR Agency Staff (in-house)	No
	Personal Assistance Services, Service	
309	1	No
309	Provided Through VR Agency Purchase Personal Assistance Services, Purchased	INO
310	Service Provider Type	No
310	Service Frovider Type	
	Personal Assistance Services, Amount of	
311	VR Funds Expended for Service (Title I)	No
	Personal Assistance Services, Amount of SE	
312	Funds Expended for Service (Title VI)	No
	Personal Assistance Services, Service	
	Provided by Comparable Services and	
313	Benefits Providers	No
	Personal Assistance Services, Comparable	
314	Services and Benefits Provider Type	Modified list of choices
	Technical Assistance Services Including Self-	
]	Employment, Service Provided by VR	 
315	Agency Staff (in-house)	No
	Tochnical Assistance Considers Including Calif	
	Technical Assistance Services Including Self-	
316	Employment, Service Provided Through VR	No
310	Agency Purchase Technical Assistance Services Including Self-	1.1-
	Employment, Purchased Service Provider	
317	Type	No
J-,	11,700	
	Technical Assistance Services Including Self-	
	Employment, Amount of VR Funds	
318	Expended for Service (Title I)	No
	1	· · -

Element		
Number	Element Name	Chango
Number	Element Name	Change
	Technical Assistance Services Including Self-	
	Employment, Amount of SE Funds	
319	Expended for Service (Title VI)	No
313	Technical Assistance Services Including Self-	
	Employment, Service Provided by	
	Comparable Services and Benefits	
320	Providers	No
320	rioviders	140
	Technical Assistance Services Including Self-	
	Employment, Comparable Services and	
321	Benefits Provider Type	Modified list of choices
321	Reader Services, Service Provided by VR	Wodined list of choices
322	Agency Staff (in-house)	No
322	Reader Services, Service Provided Through	
323	VR Agency Purchase	No
323	Reader Services, Purchased Service	
324	Provider Type	No
324	Reader Services, Amount of VR Funds	
325	Expended for Service (Title I)	No
323	Experided for Service (Title I)	
	Reader Services, Amount of SE Funds	
326	Expended for Service (Title VI)	No
320	Reader Services, Service Provided by	
	Comparable Services and Benefits	
327	Providers	No
327	Reader Services, Comparable Services and	
328	Benefits Provider Type	Modified list of choices
320	Delicitis (Tovide) Type	Widamica list of choices
	Interpreter Services, Service Provided by	
329	VR Agency Staff (in-house)	No
023	This generation (in nears)	
	Interpreter Services, Service Provided	
330	Through VR Agency Purchase	No
	Interpreter Services, Purchased Service	
331	Provider Type	No
	Interpreter Services, Amount of VR Funds	
332	Expended for Service (Title I)	No
	(	
	Interpreter Services, Amount of SE Funds	
333	Expended for Service (Title VI)	No
	Interpreter Services, Service Provided by	
	Comparable Services and Benefits	
334	Providers	No
	Interpreter Services, Comparable Services	
335	and Benefits Provider Type	Modified list of choices
	Other Services, Service Provided by VR	
336	Agency Staff (in-house)	No
	Other Services, Service Provided Through	
337	VR Agency Purchase	No
	Other Services, Purchased Service Provider	
338	Туре	No
<u> </u>	Other Services, Amount of VR Funds	
339	Expended for Service (Title I)	No
L	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>

Element		
Number	Flows ant Nove	Change
Number	Element Name	Change
240	Other Services, Amount of SE Funds	N
340	Expended for Service (Title VI)	No
	Other Services, Service Provided by	
	Comparable Services and Benefits	
341	Providers	No
	Other Services, Comparable Services and	
342	Benefits Provider Type	Modified list of choices
	Measurable Skill Gain: Educational	
343	Functional Level (EFL)	No
344	Measurable Skill Gain: Secondary	Modified reporting instructions
	Measurable Skill Gain: Postsecondary	
345	Transcript/Report Card	Modified name and reporting instructions
0.0	Transcript, Report cara	The arrive arrange arrangements
346	Measurable Skill Gain: Training Milestone	No
340	Wicasarable Skiii Gairi. Training Wilestone	140
347	Moasurable Skill Gain: Skills Brogression	No
348	Measurable Skill Gain: Skills Progression Employment Outcome	Deleted
348		Deleted
	Primary Occupation at Employment	
349	Outcome	Deleted
	Start Date of Employment in Primary	
350	Occupation	No
351	Hourly Wage at Employment	Deleted
	Hours Worked in a Week at Employment	
352	Outcome	Deleted
353	Date of Exit	No
354	Type of Exit	Modified list of choices
355	Reason for Program Exit	Modified list of choices
356	Employment Outcome at Exit	Modified list of choices
357	Primary Occupation at Exit	Modified reporting instructions
	Start Date of Employment in Primary	i j
358	Occupation	Deleted
359	Hourly Wage at Exit	No
360	Hours Worked in a Week at Exit	No
361	SSDI at Exit	Deleted
301	SSBI GC EXIC	Deleted
362	SSI for the Aged, Blind, or Disabled at Exit	Deleted
302	Temporary Assistance for Needy Families	Deleted
262		Deleted
363	at Exit	Deleted
364	General Assistance at Exit	Deleted
365	Veterans' Disability Benefits at Exit	Deleted
366	Workers' Compensation at Exit	Deleted
367	Other Public Support at Exit	Deleted
368	Primary Source of Support at Exit	Deleted
369	Medicaid at Exit	Deleted
370	Medicare at Exit	Deleted
	State or Federal Affordable Care Act	
371	Exchange at Exit	Deleted
	Public Insurance from Other Sources at	
372	Exit	Deleted
373	Private Insurance through Employer at Exit	Deleted
5/5	Not Yet Eligible for Private Insurance	Pereteu
27/	through Employer at Exit	Deleted
374	Private Insurance through Other Means at	Deleted
375	_	Deleted
- / -	Exit	Deleted

Element		
Number	Flement Name	Change
number	Element Name	Change
	Date Enrolled in Post-Exit Education or	
376	Training Program Leading to a Recognized Postsecondary Credential	No
370	Date of Attainment of Post-Exit	INO INO
277		No
377	Recognized Credential  Type of Recognized Credential Attained	I I I I I I I I I I I I I I I I I I I
378	Post-Exit	No
376		INO
379	Employment - First Quarter After Exit Quarter	No
380	Wages- 1st Quarter after Exit	Deleted
380	Type of Employment Match- 1st Quarter	Deleted
201		Dolotod
381	after Exit	Deleted
202	Employment Related to Training- 2nd	Deleted
382	Quarter after Exit	Deleted
202	Employment - Second Quarter After Exit	No
383	Quarter	No
204	Type of Employment Match- 2nd Quarter	Deleted
384	after Exit	Deleted
205	Quarterly Wages - Second Quarter After	NI-
385	Exit Quarter	No
206	Employment - Third Quarter After Exit	
386	Quarter	No
387	Wages- 3rd Quarter after Exit	Deleted
200	Type of Employment Match- 3rd Quarter	
388	after Exit	Deleted
	Employment - Fourth Quarter After Exit	
389	Quarter	No
390	Wages- 4th Quarter after Exit	Deleted
204	Type of Employment Match- 4th Quarter	
391	after Exit	Deleted
	Detection with the Court Foundation in the	
	Retention with the Same Employer in the	
202	Second Quarter and the Fourth Quarter –	
392	Fourth Quarter After Exit Quarter	No
393	Other Public Support at Application	Deleted
XX	Public Support at Application	New element number
	Madical Incomes - Courses I A II II	Naw alamant more to a
XX	Medical Insurance Coverage at Application	New element number
XX	Date of Initial IPE	New element number
XX	IPE Development Extension	New Element
	Enrolled in a Recognized Secondary School	
XX	Equivalency Program	New element number
	Date all Pre-Employment Transition	
XX	Services were discontinued	New element number
XX	Monthly Public Support at Exit	New element number
XX	Medical Insurance Coverage at Exit	New element number
	L	
	Apprenticeships and Work Based Learning	
	Experience, Service Provided through VR	
XX	Agency Purchase	New Element
	Apprenticeships and Work Based Learning	
	Experience, Service Provided through VR	
XX	Agency Purchase	New Element

Element		
Number	Element Name	Change
	Apprenticeship Training, Purchased Service	
XX	Provider Type	New Element
	Apprenticeship Training, Amount of VR	
XX	Funds Expended for Service (Title I)	New Element
	Apprenticeship Training, Amount of SE	
XX	Funds Expended for Service (Title VI)	New Element
	Apprenticeship Training, Service Provided by Comparable Services and Benefits	
xx	Providers	New Element
	Apprenticeship Training, Comparable	
XX	Services and Benefits Provider Type	New Element

Appendix 1: State Abb	reviations and Agency	Codes	
State or Territory	Abbreviation	General/Combined	Code Blind Code
Alabama	AL	001	057
Alaska	AK	002	058
American Samoa	AS	003	059
Arizona	AZ	004	060
Arkansas	AR	005	061
California	CA	006	062
Colorado	CO	007	063
Connecticut	CT	008	064
Delaware	DE	009	065
District of Columbia	DC	010	066
Florida	FL	011	067
Georgia	GA	012	068
Guam	GU	013	069
Hawaii	HI	014	070
Idaho	ID	015	071
Illinois	IL	016	072
Indiana	IN	017	073
Iowa	IA	018	074
Kansas	KS	019	075
Kentucky	KY	020	076
Louisiana	LA	021	077
Maine	ME	022	078
Maryland	MD	023	079
Massachusetts	MA	024	080
Michigan	MI	025	081
Minnesota	MN	026	082
Mississippi	MS	027	083
Missouri	MO	028	084
Montana	MT	029	085
Nebraska	NE	030	086
Nevada	NV	030	087
	NH	031	
New Hampshire			088
New Jersey	NJ	033	089
New Mexico	NM	034	090
New York	NY	035	091
North Carolina	NC	036	092
North Dakota	ND	037	093
Northern Marianas	MP	038	094
Ohio	OH	039	095
Oklahoma	OK	040	096
Oregon	OR	041	097
Pennsylvania	PA	042	098
Puerto Rico	PR	043	099
Rhode Island	RI	044	100
South Carolina	SC	045	101
South Dakota	SD	046	102
Tennessee	TN	047	103
Texas	TX	048	104
Utah	UT	049	105
Vermont	VT	050	106
Virginia	VA	051	107
Virgin Islands	VI	052	108
Washington	WA	053	109
West Virginia	WV	054	110
Wisconsin	WI	055	111
Wyoming	WY	056	112
11 younng	1 44 1	050	114

# Appendix 2: Source of Referral

Appendix 2: Source of Referral		
Code	Source of Referral	
01	14(c) Certificate Holders	
02	Adult Education and Literacy Programs (Title II)	
03	American Indian VR Services Program (AIVRS)	
04	Centers for Independent Living	
06	Service Providers	
08	DOL Adult, Dislocated Worker, and Youth Program (Title I)	
09	Elementary and Secondary Schools	
10	Post-secondary Education Institutions	
11	Employers	
12	Extended Employment Providers	
15	Intellectual and Developmental Disability Agencies	
16	Medical Health Providers	
17	Mental Health Providers	
19	Self-referral, friends, family	
	Social Security Administration	
21	Temporary Assistance for Needy Families (TANF)	
23	Veteran's Benefits or Health Administration	
$\overline{}$	Wagner-Peyser (Title III)	
27	Worker's Compensation	
29	Other Sources	
32	Other American Job Center or Workforce Development Programs	

Appendix	Appendix 3: Type of Disability	
Code	Type of Disability	Classification
00	00 No Disability	No Disability
01	01 Blindness	Visual Disability
02	02 Other Visual Disabilities	Visual Disability
03	03 Deafness, Primary Communication Visual	Auditory/Communicative Disabilities
04	04 Deafness, Primary Communication Auditory	Auditory/Communicative Disabilities
05	05 Hearing Loss, Primary Communication Visual	Auditory/Communicative Disabilities
90	06 Hearing Loss, Primary Communication Auditory	Auditory/Communicative Disabilities
07	07 Other Hearing Disabilities (Tinnitus, Meniere's Disease, hyperacusis, etc.)	Auditory/Communicative Disabilities
80	08 Deaf-Blindness	Visual Disability
60	09 Communicative Disabilities (expressive/receptive)	Auditory/Communicative Disabilities
10	10 Mobility Orthopedic/Neurological Disabilities	Physical Disabilities
11	11   Manipulation/Dexterity Orthopedic/Neurological Disabilities	Physical Disabilities
12	12 Both Mobility and Manipulation/Dexterity Orthopedic/Neurological Disabilities	Physical Disabilities
13	13 Other Orthopedic Disabilities (e.g., limited range of motion)	Physical Disabilities
14	14 Respiratory Disabilities	Physical Disabilities
15	15 General Physical Debilitation (e.g., fatigue, weakness, pain, etc.)	Physical Disabilities
16	16 Other Physical Disabilities (not listed above)	Physical Disabilities
17	17 Cognitive Disabilities (e.g., Disabilities involving learning, thinking, processing information and concentration) Intellectual and Learning Disability	Intellectual and Learning Disability
18	18 Psychosocial Disabilities (e.g., interpersonal and behavioral Disabilities, difficulty coping)	Psychological/Psychosocial Disability
19	19 Other Mental Disabilities	Psychological/Psychosocial Disability

Append	ix 4: Source of Disability
Code	Source of Disability
(	0 Cause Unknown
(	11 Accident/Injury (other than TBI or SCI)
	2 Alcohol Abuse or Dependence
(	3 Amputations
	4 Anxiety Disorders
	5 Arthritis and Rheumatism
(	6 Asthma and Other Allergies
(	7 Attention-Deficit Hyperactivity Disorder (ADHD)
	8 Autism
(	9 Blood Disorders
	0 Cancer
	1 Cardiac and Other Conditions of the Circulatory System
	2 Cerebral Palsy
	3 Congenital Condition or Birth Injury
	4 Cystic Fibrosis
	5 Depressive and Other Mood Disorders
	6 Diabetes Mellitus
	7 Digestive
	8 Drug Abuse or Dependence (other than alcohol)
	9 Eating Disorders (e.g., anorexia, bulimia, or compulsive overeating)
	20 End-Stage Renal Disease and Other Genitourinary System Disorders
	Epilepsy
	2 HIV or AIDS
	3 Immune Deficiencies Excluding HIV or AIDS
	4 Mental Illness (not listed elsewhere)
	5 Intellectual Disability
	6 Multiple Sclerosis
	7 Muscular Dystrophy
	8 Parkinson's Disease and Other Neurological Disorders
	9 Personality Disorders
	0 Physical Disorders/Conditions (not listed elsewhere)
	1 Polio
	2 Respiratory Disorders Other than Cystic Fibrosis or Asthma
	3 Schizophrenia and Other Psychotic Disorders
	4 Specific Learning Disabilities
	5 Spinal Cord Injury (SCI)
	6 Stroke
	7 Traumatic Brain Injury (TBI)

Appendix 5: Clas	Appendix 5: Classification Options for Comparable Service and Benefits Providers
Code Compa	Comparable Services and Benefits Provider Type
01 Adult εα	01 Adult education and Literacy program administered by the Department of Education
02 Adult, I	02 Adult, Dislocated Worker and Youth program administered by Department of Labor (DOL)
03 America	03 American Indian VR Services Program
04 Centers	04 Centers for Independent Living
96 Public F	06 Public Rehabilitation Program
07 Employ	07 Employer Provided Benefits
08 Public E	08 Public Educational Institution (elementary/secondary)
09 Public F	09 Public Educational Institution (postsecondary)
11 Federal	11 Federal Student Aid (e.g., Pell grants, Supplemental Educational Opportunity Grant, work study, etc.)
12 Intellect	12 Intellectual and Developmental Disabilities Agency (Public)
13 Medical	13 Medical Health Provider (Public)
14 Mental	14 Mental Health Provider (Public)
15 America	15 American Job Center Partner (not listed separately)
18 State De	18 State Department of Correction/Juvenile Justice
20 Veteran well as t	Veteran's Benefits or Health Administration (which includes VA Vocational Rehabilitation, VA hospital system, as well as the VA transitional living, transitional employment, and compensated work therapy programs)
22 Wagner	22 Wagner-Peyser Employment Service Program
23 Public £	23 Public Assistance Not Otherwise Listed
24 Other	
25 Tempor	25 Temporary Assistance for Needy Families (TANF)

Appendix	6: Reason for Exit
Code	Reason for Exit
02	<u>Health/Medical</u> : Individual is hospitalized or receiving medical treatment that is expected to last longer than 90 days and precludes entry into competitive integrated employment or continued participation in the program.
03	Death of the Individual
	Reserve Forces Called to Active Duty: Individual is a member of the National Guard or other reserve military unit of the armed forces and is called to active duty for at least 90 days.
06	Ineligible: The individual has been determined eligible for the VR program, however is no longer eligible. Include individuals who have been determined eligible, but no longer wish to see competitive integrated employment.
07	<u>Criminal Offender</u> : Individual entered a correctional institution (e.g., prison, jail, reformatory, work farm, detention center) or other institution designed for confinement or rehabilitation of criminal offenders (section 225 of WIOA).
08	<u>Ineligible:</u> The individual has no disabling condition, no impediment to employment, or does not require VR service.
13	Transferred to Another Agency: Individual needs services that are more appropriately obtained elsewhere. Transfer to another agency indicates that appropriate referral information is forwarded to the other agency so that agency may provide services more effectively. Include individuals transferred to other VR agencies.
14	Achieved Competitive Integrated Employment Outcome: Applicable only to Type of Exit (XVII.B) code value 6 (Individual exited after an IPE in competitive and integrated employment, or supported employment).
15	Extended Employment: Individuals who received services and were placed in a non-integrated or sheltered setting for a public or private nonprofit agency or organization that provides compensation in accordance with the Fair Labor Standards Act (34 CFR 361.5(c)(18)).
16	Extended Services Not Available: Individual has received VR services but requires long term extended services for which no long term source of funding is available. This code is used only for individuals who have received VR services.
17	<u>Unable to Locate or Contact</u> : Individual has relocated or left the State without a forwarding address, or when individual has not responded to repeated attempts to contact the individual by mail, telephone, text, or email.
	No Longer Interested in Receiving Services or Further Services: Individuals who actively choose not to participate or continue in their VR program at this time. Also use this code to indicate when an individual's actions make it impossible to begin or continue a VR program. Examples would include repeated failures to keep appointments for assessment, counseling, or other services.
19	All Other Reasons: This code is used for all other reasons not included in code
	values 1 through 18.  Short Term Basis Period: The individual achieved supported employment in integrated employment, but did not earn a competitive wage after exhausting the short term basis period.
21	Ineligible: The individual is required to have a relationship with VR under section 511, however the individual does not which to seek competitive integrated employment.