

## Ticket to Work Program INDIVIDUAL WORK PLAN (IWP) EXAMPLE

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### Part One: Employment Network and Ticketholder Contact Information

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1. Employment Network Name: An Employment Network

DUNS: 123456789 (previously DUNS, now referred to as PID)

Address: EN Street Address, EN City, EN State, EN Zip Code

Telephone: (123) 123-4567

Email: email@anemploymentnetwork.com

Business Model (Select one Ticketholder service model):

Traditional Services     Consumer Directed Services     Employer or Employer Agent

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2. Ticketholder's Name: Arnold Ticketholder

SSN: 999-99-9999

Address: Ticketholder Street Address, Ticketholder City, Ticketholder State, Ticketholder Zip Code

Telephone: (123) 123-4567

Email: aticketholder@beneficiary.com

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3. Ticketholder's Alternate Contact Name: Ardenia Contact

Relationship to Ticketholder: (e.g., spouse, child, friend, etc.)

Address: Alternate Contact Street Address, Alternate Contact City, Alternate Contact State, Alternate Contact Zip

Telephone: (123) 123-4567

Email: alternatecontact@contactme.com

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### Part Two: Documentation of EN-Ticketholder Discussion

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#### Section 1: Discussion Arrangement

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1. Date of Discussion: 06/01/2023

2. Discussion Modality:

Face to Face     Telephone     Other (Explain)

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3. Location: City Public Library meeting room

4. Duration: 2.5 hours

5. Name and Position of EN Interviewer: Sally Smith, Program Contact

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**Section 2: Ticketholder's Recent Work History**

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1. Check all that apply

- Currently working
- No earnings in the past 18 months
- Earnings in the month prior to the month Ticket assigned
- Earnings in 3 of the past 6 months
- Earnings in 6 of the past 12 months
- Earnings in 12 of the past 18 months

2. List all work and earnings during the last 18 months (most recent employer first) in the chart below:

Employer	Job Title	Start Date	End Date	Hourly Wage	Weekly Hours
ABC Medical Clinic	Insurance Processor	03/06/2023	05/26/2023	\$ 12.00	15

**Section 3: Ticketholder's Employment Goals**

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1. Describe short-term goal (next 3-18 months)

The short-term goals must include the specific type of occupation in which the Ticketholder will work (e.g. administrative work, nursing position, etc.), the number of hours the Ticketholder expects to work, as well as their anticipated wages or salary and a realistic timeframe to achieve their goal. If applicable, the short-term goals must also include the specific type of skills training/ education/ certification the Ticketholder will complete to achieve their goals, the expected enrollment status of the Ticketholder (e.g., part-time or full-time), as well as the anticipated graduation or completion date.

2. Describe long-term goal

The long-term goals must include the specific type of occupation the Ticketholder will work (e.g. administrative work, nursing position, etc.), the number of hours the Ticketholder expects to work, as well as their anticipated wages or salary. This section must also include why the Ticketholder selected this specific occupation and a realistic timeframe to achieve their goal. Describe how the Ticketholder's short-term goal will transition to the long-term goal.

3. Has the Ticketholder's previous employment provided any experience relative to the achievement of the:

Short-term goal above?     Yes     No

If "Yes" please explain:

Describe the previous experience and when the Ticketholder obtained that experience, the knowledge, skills, and abilities obtained from that experience, and how those the knowledge, skills, and abilities are transferable to the Ticketholder's short-term goals.

Long-term goal above?     Yes     No

If "Yes" please explain:

Describe the previous experience and when the Ticketholder obtained that experience, the knowledge, skills, and abilities obtained from that experience, and how those the knowledge, skills, and abilities are transferable to the Ticketholder's long-term goals.

4. Does the Ticketholder require additional supports and services to achieve the:

Short-term goal above?     Yes     No

If "Yes" please explain:

Provide a brief description of the additional supports and services the EN will provide or facilitate, and an explanation of why the Ticketholder needs the additional supports and services to achieve their short-term goal. Also annotate who will provide the additional supports and services and who will pay for them (if applicable).

Long-term goal above?     Yes     No

If "Yes" please explain:

Provide a brief description of the additional supports and services the EN will provide or facilitate, and an explanation of why the Ticketholder needs the additional supports and services to achieve their long-term goal. Also annotate who will provide the additional supports and services and who will pay for them (if applicable).

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**Section 4: EN Supports and Services**

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1. Short-term (Initial Job Acquisition)

Check all blocks that apply and explain how the services contribute to achievement of the Ticketholder's short-term goal.

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Career Planning

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Benefits counseling

Indicate whether the benefits counseling will be provided by the EN or if the Ticketholder will be referred to the TTW Helpline (for a WIPA referral). If the benefits counseling will be provided by the EN, list the staff member that will be providing the benefits counseling.

Goal setting

Describe how the EN is going to help the Ticketholder establish, monitor progress toward, and ensure completion of the goals.

Job coaching

Describe the specific job coaching assistance the EN will provide (e.g., on-site assistance, on-the-job training, job retention services) and how that assistance will help the Ticketholder achieve their goals.

Job development

Describe the specific job development assistance the EN will provide (e.g., resume writing, analyzing prospective jobs, improving interview skills) and how that assistance will help the Ticketholder achieve their goals.

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Career Planning (continued)

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Training (specify)

Describe the training the EN will provide or arrange for the Ticketholder. Describe how that training will help the Ticketholder achieve the goals. Describe who will perform the training, how will it be delivered (i.e., virtual or in-person), and who will pay for it.

Other (specify)

Describe the other supports and services the EN will provide related to career planning and how it will help the Ticketholder achieve their goals. Examples may include transportation, childcare, and clothing.

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Job Placement Assistance

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Job search

Describe how the EN will help the Ticketholder find a job. Describe how this assistance will help the Ticketholder achieve their goals.

Job accommodation

Describe the specific accommodation assistance (e.g., identifying the accommodations needed, assistance requesting accommodations, counseling on requesting accommodations) the EN will provide and how the assistance will help the Ticketholder achieve their goals. Identify whether the EN/Ticketholder will request the reasonable accommodations for the workplace, training, and/or educational institution.

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Job Placement Assistance (continued)

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Job placement

Describe whether the EN will provide direct job placement or job placement assistance (e.g., assistance completing applications, job referrals) and how the assistance will help the Ticketholder achieve their goals.

Other (specify)

Describe the other supports and services the EN will provide related to job placement assistance and how it will help the Ticketholder achieve their goals.

2. Long-term (Ongoing Employment Support)

Check all blocks that apply and explain how the services contribute to achievement of the Ticketholder's long-term goal.

Regular follow-up with Ticketholder (mandatory)

Indicate a mutually agreed schedule for follow-up. Describe whether follow-up services will be provided in-person, by phone, or virtually. At minimum, ENs should make contact with the Ticketholder monthly in the initial job acquisition phase, and quarterly in the ongoing support phase. When following-up, the EN must assess the needs of the Ticketholder and discuss what services and supports the EN will provide or facilitate to ensure self-sufficiency. If needed, the EN and Ticketholder must amend the goals or supports and services needed by the Ticketholder to achieve those goals. The EN and Ticketholder must amend the IWP if the Ticketholder goals change or if the supports and services needed to achieve those goals change.

Job stabilization and retention

Describe the services the EN is going to provide or facilitate to help the Ticketholder maintain employment and how it will help the Ticketholder achieve their goals.

2. Long-term (continued)

Career advancement counseling

Describe the counseling services the EN will provide to help the Ticketholder advance in their career and how it will help the Ticketholder achieve their long-term goals.

Other (specify)

Describe the other supports and services the EN will provide related to ongoing employment support and how it will help the Ticketholder achieve their goals.

3. Will the EN directly provide the supports and services above?     Yes     No

If "No," please complete question 4 below.

4. If known, list the names of the provider(s) to whom you will refer the Ticketholder, along with the services provided.

Provide a list of service providers and the services they will provide to the Ticketholder.

5. Will the EN coordinate or arrange for medical and/or related health services to the Ticketholder?

Yes     No

If "Yes," please explain:

Provide a list of medical and/or related health services the EN will coordinate or arrange for the Ticketholder.

### **Part Three: IWP Terms and Conditions**

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The following terms and conditions apply to the EN and the Ticketholder identified in Part One above:

- 1.) The EN and the Ticketholder shall inform one another immediately of any changes in the contact information shown in Part One above.
- 2.) The Ticketholder shall report all earnings to the EN and to Social Security.
- 3.) The Ticketholder shall authorize the EN to contact employers on the Ticketholder's behalf, as necessary, to verify or obtain evidence of the Ticketholder's work and earnings.
- 4.) The EN may not request or accept compensation from the Ticketholder for the costs of services and supports provided the Ticketholder under the IWP.
- 5.) The EN shall use only qualified employees and/or providers to provide supports and services to the Ticketholder.
- 6.) The EN shall establish and explain to the Ticketholder a process to resolve any disputes that arise under this IWP, including the process for escalating an unresolved dispute to Social Security.
- 7.) The EN shall inform the Ticketholder of the availability of, and contact information for, free protection and advocacy services under the Protection and Advocacy for Beneficiaries of Social Security program.
- 8.) The EN shall inform the Ticketholder of annual Timely Progress Reviews (TPR) performed by Social Security to assess the Ticketholder's work progress, and explain to the Ticketholder the TPR guidelines.
- 9.) The EN shall keep private and confidential the Ticketholder's personal information, including his or her Social Security Number and disability, and shall maintain all private and confidential information in a secure area.
- 10.) The EN shall provide the Ticketholder with a copy of the completed IWP, as well as any subsequent changes to the IWP, in the Ticketholder's preferred format.
- 11.) Both the Ticketholder and the EN must agree to any change to the IWP. All changes to the IWP must be in writing and supported by evidence of mutual consent.



12.) The EN shall provide the Ticketholder with a copy of his or her EN file upon request.

13.) Either the Ticketholder or the EN may choose unilaterally to un-assign the Ticket at any time by notifying the other in writing, thereby terminating the Ticketholder-EN relationship established by the IWP.

14.) Upon approval of the IWP by both the Ticketholder and the EN, the Ticketholder acknowledges assignment of his or her Ticket to the EN and the EN acknowledges acceptance of that Ticket.

15.) Are there any other terms and conditions relating to the implementation and administration of this IWP?

Yes     No

If "Yes," list additional terms and conditions:

You must include a summary of your initial counseling session with the Ticketholder regarding career planning and goal development. If there are no other terms and conditions, you can document the discussion summary in this space. You also have the option to include the discussion summary as an attachment.

**I choose to participate in the Ticket to Work Program with the Employment Network (EN) named below. I understand that my EN will provide me employment support to help me find a job, increase my earnings, and reduce my reliance on cash benefits. I have read and understand the requirements, obligations, terms, and conditions expressed in this IWP. I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, and it is true and correct to the best of my knowledge.**

Ticketholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

EN Representative's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*REMINDER: IWPs are not valid if they are not signed (wet or electronic) and dated by both the Ticketholder and the EN*

EN Name: An Employment Network