Kansas Vocational Rehabilitation Services

LOG SHEET for COMMUNITY-BASED

Check one: ☐ **WORK ASSESSMENT**
☐ **JOB TRYOUT**

For VR Central Office Use Only:

Client: _____
Employer: _____
VR Counselor: _____
Community Coordinator: _____
Phone: _____

Type of Job, select one:
(If the client performed more than one job at this site, select the one the client did most.)

☐ animal care
☐ childcare
☐ clerical
☐ dishwasher
☐ assembly: _____
☐ food service
☐ greeter/door attendant
☐ housekeeper
☐ janitor
☐ other: _____
☐ laundry aide
☐ maintenance
☐ receptionist
☐ stock clerk

Date: Year:											Sub-total
Time Start											
Unpaid Break											
Time End											
Hours											

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Time Start											
Unpaid Break											
Time End											
Hours											

Date: Year:											Sub-total
Time Start											
Unpaid Break											
Time End											
Hours											

Client's Signature: _____ Supervisor's Signature: _____ Total Hours: ☐

Please return the completed and signed log sheet to the VR Counselor.