

My Employment Planning Workbook

**A Resource to Use with the
Self-Directed Employment
Planning On-line Modules**

Developed by Shannon Webb and Nancy Farnon-Molfenter

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Purpose of the Workbook

This workbook goes with the Self-Directed Employment Planning On-line Modules. The module series and workbook were developed to help you to learn about planning for employment, set an employment goal, and then create a plan to reach your goal.

About the Authors

Nancy Farnon-Molfenter, Ph. D. serves as a project associate for inControl Wisconsin and APSE through funding provided by The Wisconsin Board for People with Developmental Disabilities and The Management Group. Current projects include: Self-Directed Employment Planning, Let's Get to Work, and Employment First. She holds a Master's degree in Special Education from Northeastern University and has been working in the field of disability services for over twenty years. Nancy has worked as a special educator, transition coordinator, and administrator for employment and home support agencies. Nancy also provides training and technical assistance in the areas of transition for students with intellectual and developmental disabilities, self-directed employment planning, job coaching, and family engagement for job seekers, teachers, family members and other employment support professionals. She has been involved from the onset in the effort to create an Employment First Initiative in WI. In addition to project work, Nancy is currently acting as the edTPA coordinator with the School of Education at the University of Wisconsin-Madison and completing her Ph.D. in the department of Rehabilitation Psychology and Special Education there. Nancy strives to support the aim of fully inclusive schools, communities, and workplaces.

Shannon Webb has over 25 years of experience working in the field of employment, school-to-work transition, and Home and Community Based Services for people with disabilities. Since 2005, she has been fostering innovation as a Subject Matter Expert for state and federal initiatives to increase competitive integrated employment and meaningful community inclusion for youth and adults with disabilities. Shannon has extensive experience building coalitions, facilitating community conversations, developing resources and guides, and providing training and technical assistance to stakeholders at all levels. Shannon is known for her creative problem solving and results-oriented work.



Section 1

(This section goes with Module 1: Everyone Can Work – History and Myths)

1) I want to work so I can: *(circle all of the answers that fit for you)*

Earn Money

Be Productive

Meet New People

Learn New Things

Get Out More

Help Others

Other Reasons:

2) I am worried that I: *(circle all that fit for you)*

Won't Get Hired

Won't Be Able to
Handle a Job

Have No Way To/From
Work

Might Lose Benefits

Won't Like the Job

Won't Like the Boss

Other Things:

3) People who support my desire to work are:

a.

b.

c.

d.

e.

Section 2

(This section goes with Module 2: A Working Life)

1) I think work will help me:

Have More Money

Make New Friends

Be Healthier

Be Happier

Feel Better About Myself

Build Connections

Other Things:

2) Module 2 also helped me think about working for someone else (at a business) or working for myself. The following chart lists a few things to consider.

Put a star next to the descriptions that sound good.

WORK FOR A BUSINESS	★	WORK FOR MYSELF	★
Schedule provided to me		Make my own schedule	
Same wage for each hour I work		Wages depend on work I do or how much I sell	
Amount of money I make will be the about the same each month (predictable income)		Amount of money I make can change each month (not as predictable)	
Follow directions from boss		I decide how much to work and when	
Responsible mainly for my job		I am responsible for running the business or finding someone to help	

TOTAL FOR THIS SIDE _____

TOTAL FOR THIS SIDE _____

If you like more things on the 'Work for A Business' side, you probably want to look for job. If you like more things on the 'Work for Myself' side, you might want to consider starting your own business.



Section 3

(This section goes with Module 3: Thinking about YOUR Future)

1) Some places I like to go are:

- 1.
- 2.
- 3.
- 4.
- 5.

2) Some things I like to do are:

- 1.
- 2.
- 3.
- 4.
- 5.

3) Some things I am good at doing are:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

Look at the list of places you like to go, things you like to do, and things you are good at doing. This page will give you an idea of your Interests & Transferable Skills and the types of places you might want to work.

Transferable Skills are the things you are good at doing that are similar to tasks you can do for pay at a job.

4) How do I need support?

In my community:

Places I go and things I do:	With who?	How they help me:

At school:

Places I go and things I do:	With who?	How they help me:

At home:

Places I go and things I do:	With who?	How they help me:

At jobs or volunteer positions:

Places I go and things I do:	With who?	How they help me:

The chart above can help you figure out the types of things you might need help with at a job. It can also give you more ideas about where you might want to work and the kind of job that will match your interests and skills.

5) What kinds of jobs do I know about that can use my interests and skills?

- 1.
- 2.
- 3.
- 4.
- 5.

From the list above, what are my top 2 choices?

- 1.
- 2.

6) For the jobs that I am interested in, what is the starting pay in my area?

\$_____ per hour or \$_____ per year

7) If I want to be self-employed, how much money do I think I can earn from my business each month?

\$_____ per month

8) Do I want to work somewhere there is opportunity to advance and earn more money? Yes or No

9) Do I want a job with benefits? Yes or No

If so, which ones: (check all that you want)

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Paid Vacation Time | <input type="checkbox"/> Other:_____ |
| <input type="checkbox"/> Paid Sick Time | _____ |
| <input type="checkbox"/> Health Insurance | _____ |
| <input type="checkbox"/> Dental Insurance | _____ |
| <input type="checkbox"/> Short Term Disability Insurance | _____ |
| <input type="checkbox"/> Long Term Disability Insurance | _____ |
| <input type="checkbox"/> Flex Spending | |
| <input type="checkbox"/> Retirement | |
| <input type="checkbox"/> Pension | |



10) My Ideal Conditions for Work Are:

Type of work:
Hours per week I want to work:
Days of the week:
Times of day:
Location/part of town:
Large, medium-sized, or small business:
Level of teamwork (limited, medium amount, a lot):
Amount of variety (a little, a medium amount, a lot):
Wages/Benefits:

It will be important to find out if the types of jobs you think you want match with your ideal conditions. Circle 2 or 3 things on the list above that are important for you. These are your 'non-negotiables' – or the things you feel you must have at your job. Just remember, these can change over time and you can decide to try a job even if all of the things you circled above are not met.

11) I want to check out jobs by: (check all ways that sound good to you)

- Talking to someone at my High School
- Visiting the local Job Center
- Meeting with someone at my local Community College
- Searching on the computer
- Talking with people I know about what they do
- Asking one or more businesses for tours
- Making calls to set up informational interviews
- Contacting businesses to set up job shadows
- Asking one or more businesses to do a working job tour (to try out jobs)
- Other ideas I have:

12) What help will I need with the things I checked above: (circle all that fit you)

Finding Businesses

Making Calls

Using a Computer

Getting to Meetings

Help at Meetings

Gathering Information

Other:



13) Who can I ask to help me?



Section 4

(This section goes with Module 4: Thinking about YOUR Future)

Hopefully, completing Module 3 helped you think about your interests and skills, the types of places you might like to work, the type of job you might want, and ways to check out jobs in your area.

1) After listening to Module 4, I think my barriers to employment are: (circle all that you feel apply to you)

- | | |
|-------------------------|---|
| Lack of Work Experience | Not sure what I want to do |
| Little or No Education | Job Training |
| Lack of Transportation | Need for Assistive Technology (Equipment) |

Other:

2) From the things I circled above, I can work to overcome my barriers to employment by: (circle all that sound good to you)

- | | |
|---|---------------------------|
| Creating a Resume or developing a Portfolio | Volunteering |
| Seeking an Internship or Work Experience | Going on Business Tours |
| Setting up Informational Interviews | Asking for Job Shadows |
| Asking about Requirements for Jobs | Looking into Job Training |

Getting Information about Transportation Options

Talking to Someone about my Assistive Technology Needs

Other:

3) Information for overcoming lack of work experience or uncertain goals:

Things that I have done:	Where I did those things:	Skills I developed:

You can use the information from the chart above to create your resume or employment portfolio using the “functional” format that is based on the skills you have and the things you can do for an employer. Resumes and Portfolios can be paper or electronic.

4) Education or job training options for the type of job I want are:

5) For the kind of job I want, what education or training do I need to have?

6) Who do I want to talk to about getting the education and training I need?

(circle all the people you want to talk to)

Disability Resource Services at College

Teacher/Case Manager

Division of Vocational Rehabilitation (DVR)

My family members or friends

Family Care Service Coordinator

IRIS Consultant

Support Broker

Other People:

7) Which transportation options do I have available to me now? (circle the ones you have or could have)

Bus

Taxi

Ride Share program

Friends & family - who: _____

Driver's license and my own car

Specialized transportation

Support provider

Other: _____

If you are not sure about any of the transportation options listed above, you can ask someone to help you check into your options and help you figure out how you can get to and from work.

Addressing the Need for Assistive Technology:

8) Do I want to explore how using Assistive Technology or Adaptive Equipment might help me at a job? Yes or No

If yes, I would like to: (check all that apply)

- Meet with the Assistive Technologist at the Independent Living Center
- Talk with my high school transition coordinator or special education teach
- Talk with my Disability Resource Services staff at the college
- Talk with my MCO Case Manager, IRIS Consultant, or Support Broker
- Meet with my DVR Counselor
- Research options on-line using AbleData or Job Accommodation Network
- Other:

Section 5

(This section goes with Module 5: Dealing with Public Benefits)

As you plan for employment, you should set up an appointment with a Work Incentives Benefits Specialist in your area. The Resource Guide that goes with the on-line modules has information about what those people do and where to find one.

Taking the information you write down in this section of the Workbook will be helpful to getting your Benefits Analysis completed.

This is a very important step in your employment planning process. Get help with this step as needed.

1) What benefits do I have? (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Supplemental Security Income (SSI) and Medicaid \$_____ | <input type="checkbox"/> Housing Assistance \$_____ |
| <input type="checkbox"/> Medicaid through Medicaid Purchase Plan (MAPP) | <input type="checkbox"/> Heating Assistance \$_____ |
| <input type="checkbox"/> Medicaid through another source (for example through the county economic support office) | <input type="checkbox"/> Food Share \$_____ |
| <input type="checkbox"/> Social Security Disability Insurance (SSDI) \$_____ | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Medicare | |

For benefits you get, list the amount per month. If you are not sure what benefits you have or the amount you get, ask someone to help you find out.



2) Do I want to ask my DVR counselor to include Work Incentives Benefits Counseling in my employment plan with DVR? Yes or No Explain why?

3) Where is the nearest Work Incentive Benefits Specialist(s)?

You can look up this information in the Resource Guide that goes with the on-line modules to find one near you.

4) What are my biggest concerns about my benefits?

Look back at Section 3 of this workbook if needed when completing questions 5-8.

5) The number of hours per day I would like to work: *(circle your ideal number)*

2 3 4 5 6 7 8

6) The number of days per week I would like to work: *(circle your ideal number)*

1 2 3 4 5 6

7) My ideal number of work hours per week is:

10 15 20 25 30 35 40

Take your ideal number of hours per day and your ideal number of days per week and multiple to get your ideal number of hours you want to work each week.

(hours work per day) x (days per week) = _____hours per week

8) How much money **per hour** do I want to make based what I know about the jobs I am interested in: *(circle your approximate goal)*

- \$8-\$9 \$10-\$11 \$12-\$13 \$14-\$15
 \$16-\$17 \$18-\$19 Other \$ amount: _____

9) Approximate Monthly Income *(calculate the following with help as needed)*

Hours I want to work each week

Multiplied by starting wage for the work I am interested inx

Equals weekly income

Weekly income \$_____ multiplied by 52 weeks per year =\$_____ (my yearly earnings amount) divided by 12 months per year = \$_____ (my monthly income).

This is an approximate amount of money you will make each week, year, and month when you start working. Now, you can take this information to your benefits analysis with a trained Work Incentives Benefits Specialist to see about how much extra money you could have each month by working.

10) What things in life do I want that need extra money?

What I like to do or have:	Monthly cost:

Total Additional Money Needed: \$_____

The following is a list of Work Incentives that you might want to find out about if you get Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI).

I receive **SSI**, and I am interested in learning about:

- Student Earned Income Exclusion** - allows students who are working and under the age of 22 to earn a certain amount of income each month or each year without affecting their SSI payment.

- Continuation of Medicaid Coverage under 1619(b)**: allows SSI beneficiaries who no longer receive a cash payment due to earnings to continue their Medicaid coverage until they reach the state threshold of just over \$46,500 per year in earnings (2024 amount).

- Impairment Related Work Expenses (or IRWEs)**: allow SSI beneficiaries to deduct the expenses of items or services for which they pay for that are related to their disability and needed to maintain employment.

- Blind Work Expense**: allows SSI beneficiaries who are blind to deduct expenses for items or services need for work, but these do not have to be related to the person's visual impairment.

- Plan to Achieve Self-Support (or PASS)**: a written plan that allows people to set aside income that would normally reduce their SSI payment to purchase items or services to achieve a work goal.

- Property Essential for Self-Support**: allows people who are on SSI to own resources and equipment necessary to be self-supporting with work or self-employment.



I receive **SSDI** and I am interested in learning more about:

- Trial Work Period:** allows SSDI beneficiaries to test their ability to return to work for 9 months without affecting the SSDI payment.
- Extended Period of Eligibility:** the 36-month period after the trial work months when a person can work and still receive benefits for any month that his/her earnings drop below Substantial Gainful Activity (SGA).
- Extended Period of Medicare Eligibility:** allows SSDI beneficiaries to keep their Medicare insurance coverage for 7 years 9 months after using Trial Work Periods and continuing to work.
- Expedited Reinstatement:** the period of 5 years after benefits stop that a person can ask to have his/her benefits restarted immediately if he/she stops working.
- Subsidies and Special Conditions:** are supports or exclusions provided by employer, co-worker, service provider, or vocational rehabilitation that could be factored in when determining if a person is working at Substantial Gainful Activity.
- Impairment Related Work Expense:** are expenses that a person pays for that are related to their disability that they need for maintaining work. These expenses are deducted from gross earnings when figuring Substantial Gainful Activity (SGA).
- Blind Work Expense:** allows a person who is blind to deduct the expenses related to work when determining Substantial Gainful Activity (SGA). These expenses do not have to be related to the person's visual impairment.
- Plan to Achieve Self-Support (PASS):** is a written plan that allows a person to set aside SSDI income, and begin to receive SSI and Medicaid, for a specified period of time to purchase items or services while they pursue an employment goal.

Section 6

(This section goes with Module 6: People to Help)

1) Who are the people I want to have on my employment planning team?

FAMILY MEMBERS	FRIENDS	PROFESSIONALS

Write the person's name on the chart below next to tasks you checked. If you need to find someone to help, put a check mark in the last column for that task.

2) What are the things that I will need help with and who will help me?

STEPS TO EMPLOYMENT	HELP NEEDED	WHO WILL HELP	NEED TO FIND SOMEONE
Thinking about what I like to do and what I am good at doing			
Deciding what kind of job I want			
Figuring out connections I can use			
Setting up informational interviews			
Applying for jobs			
Learning to do my job			
Ongoing support			
Coordinating my meetings			

3) How often should we meet?

bi-monthly

monthly

every 6 weeks

every 2 months

Section 7

(This section goes with Module 7: Understanding Employment Supports)

1) What information do I want in my Plan for Employment? *(circle all the things you want in your plan)*

My Interests

Money I Want to Make

My Skills

Where I Want to Work

Assessment Results

Job Development Plan

Kind of Job I Want

Job Coaching Plan

Hours I Want to Work

My Ideal Conditions

2) I want to have: *(circle all the things you want to have)*

Paper Resume - words only

Paper Resume with pictures

Electronic Resume - words only

Electronic Resume with pictures


Job Search Portfolio – paper copy

Electronic Job Search Portfolio

Additional Job Search Aids:



3) Who can I ask to help me create these?



4) How will I figure out what type of job I want to match my interests and skills?
(circle all the ways you think you want to use)

This Workbook	Discovery Process	Vocational Assessments
Job Shadows	Internships	Informational Interviews
Service Learning/AmeriCorps		Other Ways:

5) How do I want to go about job development? *(circle all you might want)*

Use Connections (mine and my team member's)	Working with a Job Developer
Informational Interviews	Customized Employment
Job Shadows	Create a Business Plan
Other Ways:	

6) What support do I think I will need to learn a new job? *(circle all things you might need help with)*

Support Setting Up Job Schedule	Understanding Job Tasks
1:1 Job Training	Meeting Co-workers
Job Adaptations	Getting Materials for Job
Technology for Assistance	Other things:

7) How long do I think I will need support at work? *(circle your best guess)*

3 months	6 months	9 months
12 months	Longer term	Not sure

Section 8

(This section goes with **Module 8: Understanding Resources for Employment and Advocating for What You Need**)

1) What classes, extracurricular and work-related experiences am I involved in?
If I need help, who helps me?

Where does the **funding** for my support come from? (School, DVR, IRIS, MCO)

What other things would I like to try?

Classes and Activities

What I do:	Who helps me:	Funding for Supports:	I would like to try:

Community Activities and Volunteering

What I do:	Who helps me:	Funding for Supports:	I would like to try:

Work Related Experiences

What I do:	Who helps me:	Funding for Supports:	I would like to try:

If you do not know where the funding for your supports comes from, ask someone to help you find out. You can advocate for yourself by sharing the list of things you want to try with your teachers, family, case manager, and others on your support team.

2) I would like to find out more about employment support services through:
(check all that apply)

- School
- DVR
- Family Care/Managed Care Organization (MCO)
- IRIS
- County
- Family support

3) What else do I want to know about resources and options for employment supports & who can I ask?

My question is:	I can ask:

Sections 9 and 10

(This section goes with Modules 9 and 10: Getting the Help You Need)

1) These are the parts of the employment process that I can do on my own (or with the support of my family), with help from an agency, or by hiring individual employment supports: (put an X in the right box for you)

Parts of the Employment Process	<i>I can do this on my own or with the support of my family</i>	<i>I would like help from an Agency</i>	<i>I would like to hire Individual Employment Support</i>
Assessment: <i>Deciding what I want to do and what my skills are</i>			
Job Development: <i>Finding a job that matches my skills and interests</i>			
Business Planning: <i>Figuring out how my business will be successful and writing a business plan</i>			
Initial Job Training: <i>Learning the tasks for my job or business</i>			
Ongoing Support: <i>Helping me stay successful at work</i>			

2) If I am interested in working with an agency, how will I get information about my options? (circle all you want to learn more about)

DVR

ADRC

MCO

IRIS

School

Friends and family

On-line - visiting agency websites

Other:

3) Will I be able to gather information about my options and make contacts on my own or will I need help?

On My Own

Help Needed

If I need help, who will I ask to help me?

4) Will I be able to interview service providers or individual employment supports on my own or will I need help?

On My Own

Help Needed

If I need help, who will I ask to help me?

There are sample interview questions in the Resource Guide. You can use those or create your own questions when hiring an agency or individual employment supports.



My Employment Goal and Team Planning Chart

Now it is time to look over all the information you have put into this workbook. Then, work with your team to create a list of steps you and your team members will take with a timeline for reaching your employment goal.

EMPLOYMENT GOAL:

The kind of job I want is: _____.

I would like to work about _____ hours per week.

I would like to make about _____ dollars each month.

TIPS for PLANNING for EMPLOYMENT:

Prepare ahead of time for your meetings.

- For each meeting: think about your progress, decide what you want to talk about, why those things are important, and team members to invite.
- You can look back at the information in Section 6 of this workbook to decide who is on your Employment Support Planning Team.
- It might be helpful to write out a list of the things you want to talk about or create an agenda for the meeting (with help if you need it).

At your meetings:

- Share the progress you have made on your employment plan.
- Ask your team members to talk about the things they have done to help you since the last time you met.

Use the chart on the next page to keep track of the steps you and your team will take. Bring this chart to each meeting and fill it out with your team. Each time you meet, you and your team should look at the chart from the meeting before and figure out what you have done already and what your next steps will be. You and your team can make copies of the blank chart and use it as many times as you need to.

Good luck with your employment planning process!

EMPLOYMENT PLANNING CHART

Meeting date: _____

What has happened since the last meeting?

Employer Contacts _____

Business Tours _____

Informational Interviews _____

Job Shadows _____

Volunteering _____

Work Experiences _____

Job Offer _____

Next steps:

STEP	WHY IS THIS IMPORTANT?	PERSON ASSISTING	TARGET DATE

Next Meeting Date: _____ **Time:** _____ **Place:** _____

**Questions or want more information?
Contact Shannon Webb
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