## Pre-ETS QUARTERLY REPORT

School District:	Calendar Year:	
School Name:	🗆 Oct – Dec	Due by Jan. 15th
	🗆 January – March	Due by April 15th
	🗆 April – June	Due by July 15th

Student's Name	Social Security Number	Pre-ETS Received
		1- Job exploration counseling
		2- Work-based learning experiences
		<ol> <li>Job exploration counseling</li> <li>Work-based learning experiences</li> <li>Counseling on transition or</li> </ol>
		5-Courseling on transition of
		A Marked a secondary education
		postsecondary education 4-Workplace readiness training 5-Instruction in self-advocacy
		5-Instruction in self-advocacy

## Describe the Pre-Employment Transition Services that were provided this quarter. Please include specific activities, dates and outcomes for all services that students received.

1. Job Exploration Counseling	
2. Work-Based Learning Experiences	
3. Counseling on Transition or Postsecondary Education	
4. Workplace Readiness Training	
5. Instruction in Self-Advocacy	

Please share any resources or innovative practices that you have found to be helpful in providing Pre-ETS.

What challenges, if any, are you experiencing in providing Pre-ETS?

I have reviewed this information and attest that it is accurate.

Authorized Staff Signature

Date

Phone