



TENNESSEE DEPARTMENT OF HUMAN SERVICES - VOCATIONAL REHABILITATION SERVICES
Job Coaching Progress Report (Non-SE Job Coaching)

Customer Weekly Progress Report for (specify inclusive dates):

Customer Name:

CRP Agency Name:

Name of Job site:

Cumulative Job Coaching hours (since referral):

COMMENTS REGARDING CUSTOMER'S PERFORMANCE

Strengths:

Areas for improvement:

Customer comments (if applicable):

Employer comments (if applicable):

Recommendations (include justification for continued job coaching and estimate of remaining hours needed):

Date the report content was reviewed with the customer or their representative/guardian:

CRP Signature: _____ Date:

JOB COACHING LOG - Customer name:

DAY:	HOURS COACHED:
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	