

1. How would you rate employment opportunities available to students with disabilities in your community?

 Great

 Acceptable  Poor

 None

 Not Sure Comments

1. What skills do your students need in order to be successful in getting and keeping these jobs?
2. What is your estimated percentage of students with disabilities having to leave their community to pursue employment, postsecondary education, or training?

 100%

 75%

 50%

 25%

 0%

 Not Sure

Comments

1. Please let us know the degree to which your postsecondary transition program focuses on the following Pre-Employment Transition Services:

**Always Sometimes Not Yet Implemented**

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Vocational Evaluation

Job Exploration Counseling

Job-Seeking Skills Instruction

Employment Etiquette Instruction

School-Based Work Experience

Community-Based Work Experience

Career-Specific Vocational Training

1. Does your district conduct any of the following?

After-School Work Readiness Programs Summer Work Readiness Programs Transition Camps

None

Comments

1. What barriers affect students' ability to achieve their postsecondary goals?

Transportation Obstacles Lack of Family Support

Lack of Existing Programs to Meet Specific Disability Needs Lack of Community Resources

Difficulty Accessing or Navigating Statewide Systems Unstable Living Situation

Other Barriers (please specify)

1. DVR utilizes the annual Alaska Statewide Special Education Conference (ASSEC) to provide teachers with information and resources. What topics would be a benefit to teachers doing transition activities?

Information around appropriate referral and eligibility for DVR services

Information and resources for accessing state and federal postsecondary transition services (I/DD, Behavioral Health, Social Security)

More information on coordinating pre-employment transition services with DVR

Basic training for teachers on supporting work experiences (job development and job supports) Other (please specify)

1. Who is the appropriate school point of contact for coordinating DVR services in your school district? (Optional)

**Name**

**School/District**

**Email Address**

**Phone Number**