

Commerce WorkFirst Programs

Community Jobs Individual Development Plan (CJ IDP) or Community Works Plan (CW Plan) VERBAL ACKNOWLEDGEMENT FORM

This form may be used by Commerce WorkFirst contractors in the absence of a participant's signature on the Community Job's Individual Development Plan (CJ IDP) or Community Works Plan (CW Plan).

This form does not apply if the plan includes any of the following:

- Substance Use disorder data
- Protected Health Information, or
- Records on – Chemical Dependency, HIV/AIDS/STD, Family Violence, or Mental Health

Complete a separate form each time the CJ IDP or CW Plan is updated. Prior to receiving verbal acknowledgement, contractors should outline all aspects of the plan with the participant. Participants can choose to give verbal acknowledgement. Contractors should follow a simple script, fill in the blank information, and answer the questions below:

Hi. My name is and I work for is a contracted service provider for the Community Jobs and Community Works program. To ensure you are aware of the activities you will be engaged in, we need your acknowledgement that the information on your CJ IDP or CW Plan has been clearly explained and that you agree to this plan. This plan will not include any Substance Use disorder data, protected health information (PHI), family violence, or mental health without separate written consent. You may revoke or withdraw your approval of this plan at any time by sending me an email.

To complete the acknowledgement of this plan, I need to ask you a few questions.

Participant Name:	<input type="text"/>
Date of Birth:	<input type="text"/>
Address or email:	<input type="text"/>

1. Was the CJ IDP or CW Plan explained and do you have a clear understanding of the activities? YES NO
2. Do you agree to engage in the activities outlined in your CJ IDP or CW Plan? YES NO
3. Do you have any questions about your CJ IDP or CW Plan? YES NO

I, , attest that I verified the identity of the participant verbally and that the participant acknowledged they understood the activities and expectations outlined in the CJ IDP or CW Plan.

Date of attestation: