

**QUARTERLY CUMULATIVE CASELOAD REPORT**  
 Rehabilitation Services Administration  
 OSERS/US DEPARTMENT OF EDUCATION

Fiscal Year \_\_\_\_\_

State \_\_\_\_\_  Blind  Oct-Dec  Oct-Jun  
 General/Combined  Oct-Mar  Oct-Sep

Operated Under Order Of Selection During Period?  Yes  
 No

CASELOAD ITEMS	TOTAL NUMBER	NUMBER WITH SIGNIFICANT DISABILITY
<b>A. APPLICATIONS AND ELIGIBILITY</b>		
<i>Applicants</i>		
1 Applicants On Hand October 1		
2 Applicants, New This FY		
3 Applicants At End Of Period (A1+A2-A5-A8-A12-D7)		
4 Applicants In Trial Work/EE On Hand, October 1		
5 Applicants In Trial Work/EE Referred This FY		
6 Applicants In Trial Work/EE At End Of Period (A4+A5-A9-A13-D6)		
<i>Eligible Individuals On Order Of Selection (OOS) Waiting List</i>		
7 Individuals On OOS Waiting List On Hand October 1		
8 Individuals On OOS Waiting List, New This FY From Application		
9 Individuals On OOS Waiting List, New This FY From Trial Work/EE		
10 Individuals On OOS Waiting List At End Of Period (A7+A8+A9-A14-D5)		
<i>Individuals Determined Eligible, Before Signed IPE</i>		
11 Eligible Individuals Before Signed IPE On Hand, October 1		
12 Eligible Individuals Before Signed IPE, New This FY From Application		
13 Eligible Individuals Before Signed IPE, New This FY From Trial work/EE		
14 Eligible Individuals Before Signed IPE, New This FY From OOS Waiting List		
15 Eligible Individuals Before Signed IPE At End Of Period (A11+A12+A13+A14-B2-D3)		

CASELOAD ITEMS	TOTAL NUMBER	NUMBER WITH SIGNIFICANT DISABILITY
<b>B. DEVELOPMENT OF INDIVIDUALIZED PLAN FOR EMPLOYMENT (IPE)</b>		
1 Individuals With Signed IPE, Before Receiving Services, On Hand October 1		
2 Individuals With Signed IPE, Before Receiving Services, This FY		
3 Individuals With Signed IPE, Before Receiving Services, At End Of Period (B1+B2-C2-D4)		
<b>C. SERVICE IMPLEMENTATION</b>		
1 Individuals Receiving Services, On Hand October 1		
2 Individuals Receiving Services, Beginning This FY		
3 Individuals Receiving Services At End Of Period (C1+C2-D1-D2)		
<b>D. OUTCOMES FOR INDIVIDUALS EXITING THE PROGRAM</b>		
1 Total Number Achieved Competitive and Integrated Employment or Supported Employment		
2 Total Number Closed After An IPE Without An Employment Outcome		
3 Total Number Closed After Eligibility, Before IPE Developed		
4 Total Number Closed After An IPE In Noncompetitive and/or Nonintegrated Employment		
5 Total Number Closed From OOS Waiting List		
6 Total Number Closed From Trial Work Experience		
7 Total Number Closed As An Applicant		
8 Total Number Of Individuals Exiting The Program (D1+D2+D3+D4+D5+D6+D7)		

Contact Person (Please Print) \_\_\_\_\_ Phone Number \_\_\_\_\_

E-mail address \_\_\_\_\_

Date \_\_\_\_\_ Authorized Signature \_\_\_\_\_

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