## Name: Clive Stewart

If you are requesting or are required to enroll into a training program as a part of your Vocational Rehabilitation Plan, then you must have this Checklist of Questions completed before you arrive for your scheduled plan development appointment. You should schedule a meeting with the appropriate instructor, advisor, counselor, or other school official for assistance in obtaining the following information.

Proposed School Name: THE Evergre	een State Coll-	29
Proposed School Name: THE Evergre Program Title: Master of Public B	Administration	J
How many students graduated from the program in the past year?		
What percentages of students who begin this program complete it?		
How many of those graduates obtained jobs? (# or %)?		
How many obtained jobs in the field for which trained?		
Examples of Job Titles they were hired into.		
Were jobs usually found in local area?		
What is a projected date training/schooling could be completed?		
Is there an admissions/acceptance procedure?Admiss	sions testing?	
Based on completed schooling and previous testing, are there developeded?	opmental/remedial classes	
Remarks:		
Costs:		
School Representative Title/Phone #	Date	