

This interactive form contains fields that you can select or fill in. Follow these tips to enter and save your information.

### Mobile Devices and Tablets

You can edit and save this interactive form using the free Dropbox and Adobe apps. To edit the form using Dropbox and the Adobe Acrobat app:

1. Open a PDF file with the Dropbox app on your mobile device.
2. Tap the edit icon (a piece of paper and a pen). You'll be prompted to install the Adobe Acrobat app, and then will be taken to the app store.
3. Once Adobe Acrobat is installed, go back to your Dropbox app and either tap Next on the screen indicating that installation is complete or, if you don't see that screen, tap the edit icon again.
4. You'll be taken to the Adobe Acrobat app, and prompted to authorize that the Adobe Acrobat app can access your Dropbox.
5. Your file will open in the Adobe Acrobat app, where you can view or edit the PDF.
6. When you finish editing, tap the back arrow to save. You'll be taken to your Dropbox where the updated file will be saved.

### Computers



*Interactive fillable form*

**A.** Purple message bar indicates presence of fillable fields. **B.** When clicked, shows where fillable fields exist.

Moving within the Forms — Use your mouse or pointing device to select icons, buttons, checkboxes, menu items and to select a space to enter information. Use the scroll bar to view more of the form you have selected.

(Optional) To make form fields easier to identify, click the Highlight Existing Fields button on the document message bar. Form fields appear with a colored background (light blue by default), and all required form fields are outlined in another color (red by default).

Entering your Information — Placing your mouse or pointing device over an entry area may display text about what to enter. You may also use the tab key to navigate through the form. To move backward to a previous area, hold down shift and then push the tab key.

Manual Entry Fields — Select an area to enter information and a blue box will surround it, with a blinking vertical line to indicate where you are entering your information.

Save forms -To save the completed form, choose File > Save As and rename the file.

Visit the Florida Developmental Disabilities Council website to receive additional materials about employment: <http://www.fddc.org/publications>. Scroll down to the blue banner titled "Employment."

## CONSIDER THIS....

1. What are the employment goals of your family member?

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2. What supports are necessary to assist your family member in reaching his or her employment goals?

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3. Is the person eligible for any of the work incentive programs?

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Now that you have read Chapters 4 and 5, go to the Personal Information Summary and complete Section C. Employment/Retirement and Section F. Financial Resources.



## Section F. Financial Resources

### Income

*Please list all financial resources available to the person, such as wages, Social Security income (include name of Social Security program), SNAP/Food Stamps, OSS, interest income.*

Source of Income	Income Amount	How Often Received

### Banking and Brokerage Accounts

Name of Bank or Brokerage Acct.	Name(s) on Account <i>(Signature Authority)</i>	Acct. Number	Type <i>(Savings, Checking, Brokerage)</i>

## Other Assets

Real Estate	Property Value
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Personal Property	Property Value
<hr/> <hr/>	
Trusts Where Person Is A Named Beneficiary	Trustee Contact Information
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Automobiles	Value
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Insurance Policies	Value
<hr/> <hr/>	
Safe Deposit Box	Location
<hr/> <hr/>	
Other	
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## Future Benefits

Is person named as beneficiary of another person's policies or accounts? (Yes / No)

### Policy Holder

Name	Address	Phone Number
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Insurance Company (Name)	Address	Policy Number
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