|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Texas Workforce Solutions logo | | | | **Texas Workforce Commission**  **Vocational Rehabilitation Services**  **Entity Headquarters Information Part C -Location(s)** | | | | | | | | |
| **Instructions**:   * For response to an Electronic State Business Daily (EBSD) posting, follow the instructions in the ESBD posting,  otherwise submit updated forms to the Quality Assurance Specialist for VR (Q) or Regional Program Support Specialist (RPSS) and Contract Manager. * Follow instructions on the form and in the TWC VR Standards for Providers. * Type all information on form using a computer and get all required signatures. * Complete all sections of the form. Record “N/A” (not applicable) if a question does not apply. * Keep a copy of your submitted form with attachments and supporting documentation for your records. | | | | | | | | | | | | |
| **Reason for Submission** | | | | | | | | | | | | |
| **Date of submission:** | | | | | | | | | | | | |
| Application package | | | **Solicitation ID:** | | | | | | | | | |
| Update of information due to change in information on file. For example, qualifications change. | | | | | | | | | | | | |
| Other: Specify: | | | | | | | | | | | | |
| **Entity’s Information** | | | | | | | | | | | | |
| **Entity**: The business that is requesting or has been granted the bilateral contract with TWC to provide services on behalf of VR customers. | | | | | | | | | | | | |
| **Entity’s legal name:** | | | | | | | **Entity’s “doing business as” (DBA) name:** | | | | | |
| **Provide at least one of the following:** | | | | | | | | | | | | |
| Employer Identification Number (EIN) (9 digits, issued by IRS): | | | | | | | | | | | | |
| Last four digits of the sole proprietor’s Social Security Number: | | | | | | | | | | | | |
| **Counties** | | | | | | | | | | | | |
| * Select all counties in which the entity can provide services with the staff currently hired. * Counties can be added and removed as your staff availability changes without an amendment to the contract. * The counties that are added must be listed on the original ESBD posting. | | | | | | | | | | | | |
| **All** 254 Texas counties | | | | | | | | | | | | |
| **Vocational Rehabilitation Region 1- Borderplex Workforce Development Board** | | | | | | | | | | | | |
| Brewster | | El Paso | | | Hudspeth | | | | Jeff Davis | Presidio | | |
| Culberson | | | | | | | | | | | | |
| **Vocational Rehabilitation Region 1- Concho Valley Workforce Development Board** | | | | | | | | | | | | |
| Coke | | Irion | | | Mason | | | | Schleicher | Sutton | | |
| Concho | | Kimble | | | Menard | | | | Sterling | Tom Green | | |
| Crockett | | McCulloch | | | Reagan | | | | | | | |
| **Vocational Rehabilitation Region 1- North Texas Workforce Development Board** | | | | | | | | | | | | |
| Archer | | Baylor | | | Clay | | | |  | | | |
| Cottle | | Hardeman | | | Montague | | | | Wilbarger | | | |
| Foard | | Jack | | | Wichita | | | | Young | | | |
| **Vocational Rehabilitation Region 1- Panhandle Workforce Development Board** | | | | | | | | | | | | |
| Armstrong | | Dallam | | | Hartley | | | | Oldham | Swisher | | |
| Briscoe | | Deaf Smith | | | Hemphill | | | | Parmer | Wheeler | | |
| Carson | | Donley | | | Hutchinson | | | | Potter | | | |
| Castro | | Gray | | | Lipscomb | | | | Randall | | | |
| Childress | | Hall | | | Moore | | | | Roberts | | | |
| Collingsworth | | Hansford | | | Ochiltree | | | | Sherman | | | |
| **Vocational Rehabilitation Region 1- Permian Basin Workforce Development Board** | | | | | | | | | | | | |
| Andrews | | Ector | | | Loving | | | | Pecos | Upton | | |
| Borden | | Gaines | | | Martin | | | | Reeves | Ward | | |
| Crane | | Glasscock | | | Midland | | | | Terrell | Winkler | | |
| Dawson | | Howard | | | | | | | | | | |
| **Vocational Rehabilitation Region 1- South Plains Workforce Development Board** | | | | | | | | | | | | |
| Bailey | | Dickens | | | Hale | | | | Lamb | Motley | | |
| Cochran | | Floyd | | | Hockley | | | | Lubbock | Terry | | |
| Crosby | | Garza | | | King | | | | Lynn | Yoakum | | |
| **Vocational Rehabilitation Region 1- West Texas Central Texas Workforce Development Board** | | | | | | | | | | | | |
| Brown | | Eastland | | | Kent | | | | Runnels | Stonewall | | |
| Callahan | | Fisher | | | Knox | | | | Scurry | Taylor | | |
| Coleman | | Haskell | | | Mitchell | | | | Shackelford | Throckmorton | | |
| Comanche | | Jones | | | Nolan | | | | Stephens | | | |
| **Vocational Rehabilitation Region 2- North Central Texas Workforce Development Board** | | | | | | | | | | | | |
| Collin | | Erath | | | Johnson | | | | Palo Pinto | Somervell | | |
| Denton | | Hood | | | Kaufman | | | | Parker  Wise | | | |
| Ellis | | Hunt | | | Navarro | | | | Rockwall | | | |
| **Vocational Rehabilitation Region 2- Tarrant County Workforce Development Board** | | | | | | | | | | | | |
| Tarrant | | | | | | | | | | | | |
| **Vocational Rehabilitation Region 2- Dallas County Workforce Development Board** | | | | | | | | | | | | |
| Dallas | | | | | | | | | | | | |
| **Vocational Rehabilitation Region 2- Texoma Workforce Development Board** | | | | | | | | | | | | |
| Cooke | | Fannin | | | Grayson | | | | | | | |
| **Vocational Rehabilitation Region 3- Heart of Texas Workforce Development Board** | | | | | | | | | | | | |
| Bosque | | Freestone | | | Hill | | | | Limestone | McLennan | | |
| Falls | | | | | | | | | | | | |
| **Vocational Rehabilitation Region 3- Capital Area Workforce Development Board** | | | | | | | | | | | | |
| Travis | | | | | | | | | | | | |
| **Vocational Rehabilitation Region 3- Rural Capital Area Workforce Development Board** | | | | | | | | | | | | |
| Bastrop | | Burnet | | | Fayette | | | | Lee | Williamson | | |
| Blanco | | Caldwell | | | Hays | | | | Llano | | | |
| **Vocational Rehabilitation Region 3- Brazos Valley Workforce Development Board** | | | | | | | | | | | | |
| Brazos | | Grimes | | | Madison | | | | Robertson | Washington | | |
| Burleson | | Leon | | | | | | | | | | |
| **Vocational Rehabilitation Region 3- Central Texas Workforce Development Board** | | | | | | | | | | | | |
| Bell | | Hamilton | | | Milam | | | | Mills | San Saba | | |
| Coryell | | Lampasas | | | | | | | | | | |
| **Vocational Rehabilitation Region 4- Northeast Texas Workforce Development Board** | | | | | | | | | | | | |
| Bowie | | Delta | | | Hopkins | | | | Morris | Titus | | |
| Cass | | Franklin | | | Lamar | | | | Red River | | | |
| **Vocational Rehabilitation Region 4- East Texas Workforce Development Board** | | | | | | | | | | | | |
| Anderson | | Gregg | | | Marion | | | | Rusk | Van Zandt | | |
| Camp | | Harrison | | | Panola | | | | Smith | Wood | | |
| Cherokee | | Henderson | | | Rains | | | | Upshur | | | |
| **Vocational Rehabilitation Region 4- Deep East Texas Workforce Development Board** | | | | | | | | | | | | |
| Angelina | | Nacogdoches | | | Sabine | | | | San Jacinto | Trinity | | |
| Houston | | Newton | | | San Augustine | | | | Shelby | Tyler | | |
| Jasper | | Polk | | | | | | | | | | |
| **Vocational Rehabilitation Region 4- Southeast Texas Workforce Development Board** | | | | | | | | | | | | |
| Hardin | | Jefferson | | | Orange | | | |  |  | | |
| **Vocational Rehabilitation Region 5- Gulf Coast Workforce Development Board** | | | | | | | | | | | | |
| Austin | | Colorado | | | Harris | | | | Montgomery | Waller | | |
| Brazoria | | Fort Bend | | | Liberty | | | | Walker | Wharton | | |
| Chambers | | Galveston | | | Matagorda | | | | | | | |
| **Vocational Rehabilitation Region 6- Golden Crescent Workforce Development Board** | | | | | | | | | | | | |
| Calhoun | | Goliad | | | Jackson | | | | Lavaca | Victoria | | |
| DeWitt | | Gonzales | | | | | | | | | | |
| **Vocational Rehabilitation Region 6- Alamo Workforce Development Board** | | | | | | | | | | | | |
| Atascosa | | Comal | | | Guadalupe | | | | Kerr | Medina | | |
| Bandera | | Frio | | | Karnes | | | | McMullen | Wilson | | |
| Bexar | | Gillespie | | | Kendall | | | | | | | |
| **Vocational Rehabilitation Region 6- Lower Rio Grande Valley Workforce Development Board** | | | | | | | | | | | | |
| Hidalgo | | Starr | | | Willacy | | | | | | | |
| **Vocational Rehabilitation Region 6- Cameron County Workforce Development Board** | | | | | | | | | | | | |
| Cameron | | | | | | | | | | | | |
| **Vocational Rehabilitation Region 6- Middle Rio Grande Workforce Development Board** | | | | | | | | | | | | |
| Dimmit | | Kinney | | | Maverick | | | | Uvalde | Zavala | | |
| Edwards | | La Salle | | | Real | | | | Val Verde | | | |
| **Vocational Rehabilitation Region 6- Coastal Bend Workforce Development Board** | | | | | | | | | | | | |
| Aransas | | Duval | | | Kleberg | | | | Nueces | San Patricio | | |
| Bee | | Jim Wells | | | Live Oak | | | | Refugio | | | |
| Brooks | | Kenedy | | |  | | | |  | | | |
| **Vocational Rehabilitation Region 6- South Texas Workforce Development Board** | | | | | | | | | | | | |
| Jim Hogg | | Webb | | | Zapata | | | |  |  | | |
| **Describe the service area your organization has staff available to provide services, including any limitation to the counties or board listed.**  (e.g., Travis county, services are only available within city limits of Austin Texas, or services are available in all counties indicated above) | | | | | | | | | | | | |
| **Signatures** | | | | | | | | | | | | |
| I, the legally authorized representative, have been named by the entity and have the authority to certify   * the entity has the ability to provide services in each location(s) identified above * the information provided in this form is complete and accurate, and * the legal entity is in compliance with all the terms in the Electronic State Business Daily Agency Posting notice, TWC VR Standards for  Provider Manual, and/or contract, if awarded. | | | | | | | | | | | | |
| **Typed name:** | | | | | | **Handwritten Signature:**  **X** | | | | | **Date:** | |
| **Agency Use Only** | | | | | | | | | | | | |
| **Counties marked above are in the EBSD corresponding to the entity’s application.** Yes  No | | | | | | | | | | | | |
| **Comments, if any:** | | | | | | | | | | | | |
| **Reviewers of the Form** | | | | | | | | | | | | |
| **Date** | **Printed Name** | | | | | | | **Title** | | | | **Initials** |
|  |  | | | | | | |  | | | |  |
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