

## **Application Packet: Fall Semester 2018**

**Thank you for applying to Leadership & Career Studies, a 4 year authentic college experience for young adults with intellectual disabilities at Temple University.**

**Attached you will find the necessary forms that need to be completed by you and your family member and/or support person.**

**Applications are due on or before**

**March 2, 2018**

**If you have any questions concerning the completion of these forms you may contact:**

**Titania Boddie, Leadership & Career Studies Manager**

**[Tboddi01@temple.edu](mailto:Tboddi01@temple.edu)**

**215.204.3916**

# **Leadership & Career Studies**

## **Admission Process Overview &**

### **2017/2018 Important Dates**

- **November 1, 2017 through March 2, 2018:**
  - **Applications accepted for the 2018 Fall Semester**
- **March 2, 2018:**
  - **All applications are due**
- **Once the COMPLETE Application package is received, applicants will be scheduled for an interview, if all the eligibility criteria are met.**
- **April 27, 2018:**
  - **Students are notified of their admission status**
- **May 14, 2018 through June 29, 2018**
  - **Individual person centered planning sessions and assessments will be scheduled and held with each Leadership & Career Studies Freshman.**
- **August 20 through August 24, 2018**
  - **Mandatory Freshman Orientation**
- **August 27, 2018**
  - **Temple University Classes begin**

## Leadership & Career Studies Eligibility Criteria

The Application Screening Committee will review your application and determine your eligibility for the program. If you are determined to be eligible for the program, you will be scheduled for an interview. You will be interviewed by the interview team in person by yourself. After your personal interview the interview team will meet with family members or support people to answer any questions about Leadership & Career Studies.

Students will be selected for admission after all applicant interviews are completed. Please do not call about the status of your application, as we will not be able to provide this information for you over the phone. You will be notified of your acceptance status by April 27, 2018.

**Note:** Due to space limitations, **not all applicants** who complete the application and meet the “criteria for admission” can be accepted in Leadership & Career Studies.

The decision to offer or deny admission to the program will be made by the Screening Committee in their best judgment and in the best interest of the applicant. Admission is based on the following criteria:

1. Applicants must be between the ages of 18-26 at the start of the program.
2. The applicant must have an intellectual disability as documented through the County Office of Intellectual Disabilities/Developmental Disabilities in which the applicant resides.
3. Must be registered with **Office of Vocational Rehabilitation (OVR)**
4. **If accepted**, obtain all necessary documents to complete the Free Application for Federal Student Aid (FAFSA) Recent federal income tax returns, W-2's, and a Federal Student Aid (FSA) ID.
5. The applicant must have sufficient emotional and independent stability to participate in all aspects of the Leadership & Career Studies coursework and campus environment.
6. The applicant must demonstrate the ability to accept and follow reasonable rules and behave respectfully towards others. Note: Leadership & Career Studies does not have the personnel to support students with difficult and challenging behaviors nor can we dispense medications to students.
7. The applicant must demonstrate the desire to attend the Leadership & Career Studies and adhere to all the Leadership & Career Studies policies regarding attendance and participation in the Leadership & Career Studies coursework, typical Temple University classes, and be willing and able to spend ten hours every week of the 16 week semester with their assigned mentor engaging in academic and college life activities. **All applicants must also be available to attend day and evening classes and student activities.**
8. Applicants selected must be available to attend a week long Student Orientation scheduled **before** the start of the Fall semester (August 20 through August 24, 2018)
9. Applicants must have a transportation plan for attending classes and activities on Temple University's campus. NOTE: Temple University and the Leadership & Career Studies staff are unable to provide transportation to and from the campus or assist with travel training.
10. Applicants must have an operating cell phone with them at all times while on campus.

# Application Instructions

**To be considered for Admission to the 2018 Fall Semester your application must be received by March 2, 2018.**

**We request that all of the following sections be completed in order to assist us in determining if the Leadership & Career Studies is the right program for you. All information is confidential and will not be shared with any outside organizations unless written agreement is provided by the applicant.**

## **Application Sections:**

1. Student Information Section
2. Family/Guardian/Residential Provider Section
3. Education History Section
4. Employment History Section
5. Medical History Section
6. Personal Supports Inventory **~to be filled out by a family member, guardian, or support person only**

## **Mandatory Documentation:**

A copy of your most recent Individual Support Plan (ISP) **must** be included

# Application Instructions

**Completed Applications should be sent to:**

**The Institute on Disabilities at Temple University**

**1755 N 13th Street, Suite 411 South**

**Philadelphia, PA 19122**

**Attention: Leadership & Career Studies**

**Applications may be FAXED to: 215.204.6336**

**You may scan and email your completed application to Denise Becket using TU SafeSend**

It is important to use TU SafeSend to send your Leadership & Career Studies application electronically to safeguard your Social Security number and other confidential information. You can access TU SafeSend at this website: <https://tusafesend.temple.edu/>

You do not need to “log in” just click the link for “drop-off” and send to Denise Beckett’s email address. Denise’s email address is [dbeckett@temple.edu](mailto:dbeckett@temple.edu).

Please send Denise an email to let her know you have sent your application via TU SafeSend and she will retrieve your application.

Should you have any questions, please let Denise know.

**APPLICANT INFORMATION**

<b>Applicant Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>Home Phone</b>
<b>Address</b>			<b>Social Security Number</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Birth Date</b>
<b>Email address</b>			<b>Cell Phone</b>

\*\*Your SSN is confidential and under federal law it is protected and will not be disclosed to unauthorized parties. Disclosures may be authorized for the purpose of state and federal financial aid, or registering for Temple University services

**Which County Office of Intellectual Disabilities/Developmental Disabilities has determined you eligible for services?**

Philadelphia County Department of Behavioral Health and Intellectual disABILITY Services

Delaware County Office of Intellectual Disabilities

Montgomery County Behavioral Health/Developmental Disabilities Office

Bucks County Department of Mental Health/Developmental Programs

Chester County Department of Mental Health/Intellectual & Developmental Disabilities

**Have you applied to Leadership & Career Studies before?**

Yes\_\_\_ No\_\_\_

**If yes, what year did you apply? \_\_\_\_\_**

**APPLICANT INFORMATION**

**Are you receiving waiver funding?**

Yes \_\_\_ No \_\_\_ Not sure \_\_\_

**If yes, which waiver?**

\_\_\_ **Person/ Family Driven Support Waiver**

\_\_\_ **Consolidated Waiver**

\_\_\_ **Community Living Waiver**

**What other supports do you receive? (Please check those that apply)**

\_\_\_ **Supplemental Security Income**

\_\_\_ **Medical Assistance**

\_\_\_ **Social Security Disability Insurance**

\_\_\_ **Office of Vocational Rehabilitation funding**

\_\_\_ **Special Education Services (IDEA funding)**

\_\_\_ **Office of Vocational Rehabilitation (OVR)**

\_\_\_ **Other**

**Who is your Supports Coordinator?**

**Name:** \_\_\_\_\_ **Phone number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**How did you hear about Leadership & Career Studies?**

\_\_\_\_\_

\_\_\_\_\_

## FAMILY/RESIDENTIAL INFORMATION

Applicant lives with:

Both parents   
  Mother   
  Father   
  Guardian(s)   
  Other

<b>Mother/Guardian: Last Name</b>	<b>First Name</b>	<b>Home Phone</b>
<b>Address</b>		<b>Cell Phone</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Email Address</b>		
<b>Father/Guardian – Last Name</b>	<b>First Name</b>	<b>Home Phone</b>
<b>Address</b>		<b>Cell Phone</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Email Address</b>		
<b>Residential Provider Organization Name</b>		
<b>Residential Contact Person Last Name</b>	<b>First Name</b>	<b>Home Phone</b>
<b>Address</b>		<b>Cell Phone</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Email Address</b>		



## EDUCATION HISTORY

Schools Attended (Name, City, State)	Years attended	Reason for Leaving

Did you receive a high school diploma or equivalent?                      No                      Yes

From (school) \_\_\_\_\_ Date \_\_\_\_\_

In a few words, please describe your academic strengths and weaknesses.

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In a few words, how do you think you learn best? (E.g. small groups, extra time)

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In the following areas describe what skills you would like to learn?

- Independent living: \_\_\_\_\_
- Academic Coursework (e.g. History, Computers, Reading) :

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- Social/Recreational /Leisure: \_\_\_\_\_
- Employment

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Did you use any accommodations in High School?                      Yes                      No

If yes, what kind?

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## EMPLOYMENT HISTORY

Please complete the following:

Note: prior work experience is not a requirement for admission into this program

Name of Business/Employer	Paid or Unpaid	Job Responsibilities	Reason for Leaving	Amount of time at job

Are you currently working?

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Are you currently participating as a volunteer?

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What work experiences do you have an interest in or enjoy?

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### TRANSPORTATION

What transportation plan will you be using to attend the program?

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Will this plan allow for attending evening classes and participating in recreational, social and leisure opportunities to occur after 5 pm and on weekends?

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Are there any limitations, support needs or related issues to transportation? (Please list)

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**NOTE:** Temple University and Leadership & Career Studies are unable to provide travel training or transportation to and from the campus.

**MEDICAL HISTORY**

**Please list any significant medical or physical emotional or behavioral conditions that may impact your participation in classroom, social, or recreational activities on campus, including severe allergies:**

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**Please list any current medications and indicate why you are taking the medication:**

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**Note: If the applicant must take medications while on campus, he/she must be independent in administering his/her medications. Temple University and Leadership & Career Studies do not have the personnel or facility to administer medications. This is not included in any of the Leadership & Career Studies or college services.**

**Do you currently receive therapeutic services, such as physical therapy, occupational therapy, psychiatry, speech therapy, behavioral therapy? If so, please indicate which services:**

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**Are you independent in self-care such as toileting, and basic hygiene?**

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**Note: If not, the applicant will need to arrange for personal assistance services in order to attend Leadership & Career Studies. This is not included in any of the Leadership & Career Studies or college services.**

**Medical Insurance Name:** \_\_\_\_\_

**Policy Number** \_\_\_\_\_

**Please provide any other medical information that you feel would be important regarding your participation in Leadership & Career Studies, please specify.**

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**Emergency Contact Information**

**Please Contact** \_\_\_\_\_ **at** \_\_\_\_\_

**Name**

**Telephone Number**

# **PERSONAL SUPPORT INVENTORY**

**(Permission to use this form was given by the developer, the Career and Community Studies program of The College of New Jersey)**

## **Personal Support Inventory**

**To be filled out by:**

**Parent/Family/Guardian/Support person**

	<b>1</b> <b>(Requires complete assistance)</b>	<b>2</b> <b>(Needs moderate assistance)</b>	<b>3</b> <b>(Needs some assistance)</b>	<b>4</b> <b>(Needs minimal assistance)</b>	<b>5</b> <b>(Completely Independent)</b>
<b>Independent Living Skills</b>					
Negotiating/finding way around campus environment					
Ordering and purchasing from a restaurant/cafeteria/store					
Handling personal affairs: laundry, light cooking, cleaning, managing personal belongings					
Interpersonal Skills: Ability to relate to others					
Asks for help, clarification, or questions					
Use of judgment skills in an emergency					
Emotional: Copes with stress					
Adjusts to new situations					

	<b>1</b> <b>(Requires complete assistance)</b>	<b>2</b> <b>(Needs moderate assistance)</b>	<b>3</b> <b>(Needs some assistance)</b>	<b>4</b> <b>(Needs minimal assistance)</b>	<b>5</b> <b>(Completely Independent)</b>
<b>Social Skills and Communication</b>					
Communicating needs in an appropriate manner					
Engaging in appropriate social interaction					
Using pay phone, cell phone, email					

	1 (Requires complete assistance)	2 (Needs moderate assistance)	3 (Needs some assistance)	4 (Needs minimal assistance)	5 (Completely Independent)
<b>Academic Skills</b>					
Handling money; counting change/bills, understanding values, using checkbook, staying within budget					
Math skills: Approximate Grade Levels: _____ Addition _____ Subtraction _____ Multiplication _____ Division					
Reading and writing skills: Approximate Grade Levels: _____ Reading _____ Writing _____ Listening comprehension					
Computer Skills: Word processing Internet					
Motivation to learn and persist on new tasks					
Knows and can verbalize and/or write personal information: name, address, phone, SSN, etc.					
Ability to follow verbal directions					
Ability to follow written directions					
Ability to keep a daily schedule with due dates and assignments					

Has applicant used any assistive technology? If yes, what?

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Additional remarks: Please list/discuss any physical, intellectual, social or emotional conditions that may need to be considered when planning a postsecondary experience.

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# Application Checklist

Please be sure that you have completed and submitted all of the following mandatory application sections and attach a copy of your most recent Individual Support Plan and High School Diploma:

1. Student Information Section, pages 6-7 \_\_\_\_\_
2. Family/Residential Section, page 8 \_\_\_\_\_
3. Education History Section, page 9 \_\_\_\_\_
4. Employment History Section, page 10 \_\_\_\_\_
5. Medical History Section, page 11 \_\_\_\_\_
6. Personal Supports Inventory Section, pages 13-14 \_\_\_\_\_
7. Individual Support Plan (ISP) \_\_\_\_\_
8. High School Diploma \_\_\_\_\_