



Project | SEARCH

Great Oaks Career Campuses

Project SEARCH Student Application 2016-2017

Name _____

Affiliate School _____

1st Choice Program _____

2nd Choice Program _____

Other Great Oaks
Program Applications
Completed _____

Equal Opportunity: Career major placement will be made without regard to race, color, national origin, sex, age, religion or presence of a disability.

Application Purpose & Guidelines

The purpose of this application packet is to outline the skill set of the Project SEARCH student candidate. This application enables the Selection Committee* to properly assess each student candidate's skills, abilities and background. A parent, student, counselor, teacher or employer may be contacted by the Selection Committee to gather additional information. Our final goal is to select students who will be successful in a Project SEARCH program and reach the outcome of competitive employment.

The Selection Process includes the following guidelines:

1. All students are encouraged to attend an Open House *and* **must visit** the host business site to observe the culture, possible rotations and meet the instructor and job coaches prior to being selected to participate in Project SEARCH.
2. Submit the completed application and documentation by Monday, February 1, 2016 to:
Project SEARCH, Administrative Assistant
Instructional Resource Center
100 Scarlet Oaks Drive
Cincinnati, OH 45241
Phone: 513-612-3676
Fax: 513-612-3666
Email: theroux@greatoaks.com
3. During the first round of application review, the Selection Committee will make a decision on the 1st choice program listed on the application. If not accepted for the 1st choice, the application will be forwarded for the second round of application review for the second choice listed.
4. Once an applicant is recommended for acceptance:
 - An IEP will be developed with the IEP team for the 2016-2017 school year.
 - The student may be required to pass a criminal background check and/or drug screen.
 - The student will begin the process for eligibility with the Opportunities for Ohioans with Disabilities Agency (OOD). (If not already completed)

Please note:

*The Selection Committee will include a Great Oaks Project SEARCH instructor, representative(s) from the host business, an Opportunities for Ohioans with Disabilities (OOD Counselor) and other agency/school representative(s)

The following must be taken to or sent before the IEP meeting:

- ✓ Copy of State ID or driver's license
- ✓ Copy of Social Security Card and Copy of Birth Certificate
- ✓ Copy of Proof of Health Insurance or Medical Card
- ✓ Social Security Award Letter (if applicable)
- ✓ Copy of court ordered guardianship (if applicable)

Based on the location, the following may be required after acceptance:

- Background check Drug screen Shot/Immunization Record or Copy

The student will have met all graduation requirements and deferred the diploma prior to the final IEP in the Spring of 2016.

Project SEARCH Application Packet Checklist

The following must be completed and sent with the application:

- Completed Application Packet
- Current Individual Education Plan (IEP) including Transition Goals
- Current Evaluation Team Report (ETR)*
*Include Most Recent Math and Reading Scores/Grade Levels
- High School Transcript (or most recent High School Record)
- School Transcript from any other formal training (if applicable)
- Optional:** Great Oaks Career Assessment
- Must shadow or schedule a visit to preferred Project SEARCH location(s)

(Visits do not need to be completed by deadline, but must be scheduled.)

Project SEARCH entrance criteria:

- Student must be at least 18 years of age.**
- Student must have completed all requirements for graduation.**
- Student agrees that this will be the last year of services, and will accept the diploma at the end of the Project SEARCH school year.**
- Student is encouraged to have successfully completed a paid or unpaid experience in a work environment.**

- Student must complete an application for services through OOD.
- Student must have independent personal hygiene and grooming skills.
- Student must have independent daily living skills.
- Student must maintain appropriate behavior and social skills in school and workplace.
- Student must take direction to change behavior.
- Student must be able to communicate effectively.
- Student must have the desire to explore transportation options, including public transportation when available, and be trained to travel independently.
- Student must have the ability to pass a drug screen and felony check.
- Student must have immunizations up to date.
- Student must have the desire to work competitively at the conclusion of the Project SEARCH program.

APPLICATION FOR ADMISSION

Please complete and return to your affiliated school counselor



Please mark the following programs in order of your interest with a 1, 2, and 3. Number 1 will be the first choice program with the highest interest, etc.

A. Program Choice

_____ Cincinnati Children’s Hospital _____ Fifth Third Bank Madisonville
_____ Xavier University

B. Personal Data

Name _____
Last First Middle (complete)

Student Cell Phone _____ Student e-mail: _____

Address: _____
Number Street City Zip Code

School District of Residence: _____ Current School/ Program Attending: _____

Date of Birth: _____ Male Female

Birth City & State: _____ County of Residence: _____

Ethnicity: Are you Hispanic/Latino? Yes No SS#: _____

Select one or more of the following: American Indian/Alaska Native Asian White
 Black or African American Native Hawaiian or Other Pacific Islander

Mother’s Name: _____ **Address:** _____
(if different than home address)

Home Phone _____ Cell Phone _____ Work Phone _____

E-mail address: _____

Father’s Name: _____ **Address:** _____
(if different than home address)

Home Phone _____ Cell Phone _____ Work Phone _____

E-mail address: _____

CUSTODIAN/GUARDIAN Both Parents Mother Father or

*** Other/Legal Guardian: _____ Living with: _____

*****If custodian/guardian is not the parent legal court documentation must be provided and submitted*****

Final placement into this career major will depend upon the Individual Education Plan (IEP) Meeting and the selection committee. **A two-week trial period will be required of all accepted enrollees.**

The student will seek competitive employment before the end of the 2016-2017 school year.

Release: The student records concerning my son/daughter may be transferred to Great Oaks from his/her Affiliated School for review by the professional staff.

Parent/Guardian Signature: _____ Date: _____

Student Signature _____ Date: _____

EMPLOYMENT BACKGROUND:

List jobs you do or have done in school or in the community (including volunteer work):

Employer/Organization Address Phone	Dates	Job Title and List of Job Duties	Supervisor Name	Paid	Un- paid
	From To	Title: 1. 2. 3.		<input type="checkbox"/>	<input type="checkbox"/>
	From To	Title 1. 2. 3.		<input type="checkbox"/>	<input type="checkbox"/>
	From To	Title 1. 2. 3.		<input type="checkbox"/>	<input type="checkbox"/>

Have you received/are you receiving job coach services during work experience?

Yes No

If yes, what percent of the time is the job coach involved in the work experience? ____%

Have you ever been fired from a job? Yes No

If yes, please explain:

Have you ever quit a job? Yes No

If yes, please explain:

After the Project SEARCH program is completed, do you plan on getting and maintaining a

Full time job Or a Part time job? How many days/hours per week? _____

What kind of work would
you like to do?

Where do you plan on
living?

Home Friends Other

TRANSPORTATION:

How do you plan to get to Project SEARCH?

- Metro Access Parents Drive Self

SERVICE AGENCIES:

Do you have a Vocational Rehabilitation Counselor? (BVR, BSVI or OOD)

- Yes Counselor's Name _____ Phone Number: _____
 No

Are you eligible for services from the County Board of Developmental Disabilities (DD)?

- Yes Counselor's Name _____ Phone Number: _____
 No
 Never applied

Are you receiving Social Security benefits? Yes No

INDEPENDENT LIVING:

Medications/ dosage/ Time of day taken by student

Medication	Dosage	Time of day

List any health or medical issues that may impact a successful job placement:

Please list any limitations that may impact an internship rotation or employment:

BEHAVIORAL SUMMARY:

Do you have any behaviors that might impact a successful job placement?

Yes No

Please Explain:

STUDENT RESPONSE QUESTION

Why do you want to come to Project SEARCH? (Student must complete)

List Three References (Non Related):

	Name	Relation to you	Phone Number	Email Address
1.				
2.				
3.				

This application has been completed by:

Name	Title	Phone Number	Date
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Signature _____

Student Participation Contract*

I, _____, understand that I have been accepted into the Project SEARCH program and must abide by the following terms and conditions:

- I understand Project SEARCH is a one year training program and I will actively pursue competitive employment when I have completed the program.
- I will complete at least three unpaid job rotations within the host business.
- I will attend the program every day as scheduled.
- I understand that the Project SEARCH program correlates with a Great Oaks school calendar.
- I will dress appropriately and wear required attire.
- I will call my instructor and departmental supervisors when I am absent or tardy.
- I understand that I am responsible for transportation to/from the host site.
- I will learn to use public transportation when available.
- I will follow all the rules established by the program and host business.
- I will attend and be an active participant at our monthly meetings with my rehabilitation counselor, parents, teachers, and business staff.
- At completion of the program, I will receive my high school diploma and pursue competitive employment.***

I have read the above terms and conditions and agree to accept my placement in the Project SEARCH program. I understand that I may be asked to leave Project SEARCH if I fail to follow the terms and conditions.

Student Signature

Date

Parent/Guardian Signature

Date

****The student will be asked to sign this upon acceptance into the program at the IEP meeting.***

Great Oaks Project SEARCH Applicant Name _____

Affiliated Counselor Use Only: This page is to be filled out by your affiliated school counselor. Affiliated counselor please return to Ed Theroux at theroux@greatoaks.com or fax to (513) 612-3666.

Total Credits to Date _____	Cumulative GPA _____		
Does the student have the necessary credits for graduation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
List Course Deficiencies:	1. _____	2. _____	
	3. _____	4. _____	
Days Absent: Previous Year _____	Current Year _____	Days Tardy: Previous Year _____	Current Year _____
Comments about Attendance: _____			

Note: Student must have made arrangements to defer the High School Diploma.

Counselor Comments: _____

When returning, please attach transcript and most recent report card.

Affiliated School Counselors Name: _____

Affiliated Counselors

Signature: _____

Date: _____