



UNICORN VILLAGE ACADEMY
Post-secondary Transition Program



Student Application
2020-2021

Student name: _____

Affiliate school: Unicorn Village Academy

Program: *select one*

- Project SEARCH UVA Post-secondary Transition Program

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 student candidate. This application assists 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 the program and reach the outcome of competitive employment.

The Selection Process includes the following guidelines:

1. All students are required to attend a skills assessment at the host business site and may have the opportunity to observe the culture, and meet the instructor and job coaches prior to being selected to participate.
2. Submit the completed application by Friday April 3, 2020 to:
Sharon Alexander
Unicorn Children's Foundation
99 SE Mizner Blvd., Suite 120
Boca Raton, FL 33432
3. If accepted:
 - The Selection Committee will review the application and match the student skill set and interests with the appropriate job sites.
 - The student will be required to pass a criminal background check and/or drug screen.

Please note:

*The Selection Committee will include Unicorn Children's Foundation staff, Unicorn Village Academy instructor(s), representative(s) from the host business, and a Department of Vocational Rehabilitation Counselor.

This application packet is utilized for both adult and high school transition candidates.

Application Packet Checklist

The following must be completed and sent with the application:

- Completed Application Packet**

- Current Evaluation Team Report***
*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)**

The following must be submitted prior or at time of IPE meeting:

- **Proof of Health Insurance (Social Security determination if applicable)**

- **Photo**

- **Copy of Birth Certificate**

- **Copy of Social Security Card**

- **Copy of State ID or driver's license**

- **Immunization Record**

- **Background check will be required by some locations.**

- **Drug screen will be required by some locations.**

APPLICATION FOR ADMISSION

Please complete and return to Unicorn Children’s Foundation

A. Personal Data

Name _____
Last First Middle

Address: _____
Street City Zip Code

School District of Residence: _____ School/program Currently Attending: _____

Date of Birth: _____ Male Female

Parent/Guardian Name: _____ Parent/Guardian e-mail: _____

Address: _____
Street City Zip Code

Parent/Guardian phone: _____ alt phone: _____

Parent email: _____

B. Parent/Student Information:

Final placement into this career major will depend upon the Individual Plan for Employment (IPE) 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 2020-2021 school year.

Release: The student records concerning my son/daughter may be transferred to Unicorn Village Academy 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 (include volunteer work):

Employer/Organization	Job Title	Job Duties	Supervisor Name	Dates	Contact Number	Paid	Un-paid
		1. 2. 3. 4.				<input type="checkbox"/>	<input type="checkbox"/>
		1. 2. 3. 4.				<input type="checkbox"/>	<input type="checkbox"/>
		1. 2. 3. 4.				<input type="checkbox"/>	<input type="checkbox"/>

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 program is completed, do you plan on getting and maintaining a

Full time job Or a Part time job?

Where or with what kind of

Organization? _____ How many days/ hours per week? _____

Where do you plan on living?

Home

Friend

Other

TRANSPORTATION:

How do you plan to get to program site?

- Palm Tran
- Parents
- Drive Self
- Other

SERVICE AGENCIES:

Do you have a Vocational Rehabilitation Counselor?

Yes

Counselor's Name: _____

No

Phone Number: _____

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 attend this program? (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

Signature Date

Student Participation Contract*

I, _____, understand that I have been accepted into the UVA Post-secondary Transition / Project SEARCH program and must abide by the following terms and conditions:

- I understand this 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 this program correlates with the Unicorn Village Academy 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 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 vocational rehabilitation counselor, parents, teachers, and business staff.
- At completion of the program, I will pursue competitive employment.

I have read the above terms and conditions and agree to accept my placement in the UVA Post-secondary Transition / Project SEARCH program. I understand that I may be asked to leave the program 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 IPE meeting.***

Affiliated Counselor Use Only:

C. Please attach transcript and most recent report card

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. _____
Comments about Attendance:	_____ _____ _____

Note: If in high school, student must have made arrangements to defer the High School Diploma.

Counselor Comments: _____

Affiliated School Counselors Name: _____ Title: _____

Counselor signature: _____ Date: _____

Program entrance criteria:

- Student must be at least 17 years of age.
- Student must meet eligibility requirements for UVA.
- 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 previous successful experience in a work environment (paid or unpaid).
- 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 program.

Transition Coordinator Use Only:

D.

Please attach most recent performance review

Total years vocational training: _____

Vocational skill strengths: _____

List job types (locations & tasks):

1. _____

2. _____

3. _____

4. _____

Does student meet the following program entrance criteria? 3- Independently 2- With assistance 1- No

- ___ Student must meet eligibility requirements for UVA.
- ___ Student must have independent personal hygiene, dressing and grooming skills.
- ___ Student must maintain appropriate behavior and social skills in school and workplace.
- ___ Student must demonstrate flexibility, the ability to adapt to change and take staff direction
- ___ Student must be able to communicate effectively in one to one and group settings.
- ___ Student must have the desire to explore transportation options, including public transportation when available, and be trained to travel independently.
- ___ Student must demonstrate the ability to self-regulate their emotions and resulting behaviors.
- ___ Student must demonstrate the ability to comply with routines, once established.
- ___ Student must have previous successful experience in a work environment (paid or unpaid).
- ___ Student must have the desire to work competitively at the conclusion of the program.

___ Total score

Transition Coordinator Comments:

Transition Coordinator name: _____ Title: _____

Transition Coordinator signature: _____ Date: _____