



**Hope Academy-Project SEARCH**  
**Enrollment Application**  
**2011-2012**

**Name**

**Address**

**Phone**

---

---

---

## **Application Purpose & Guidelines**

The purpose of this application packet is to outline the skill set of the Project SEARCH candidate. This application enables the Selection Committee to properly assess each 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 paid employment.

### **The Selection Process includes the following:**

1. Submit the completed application by Friday, April 15, 2011 to:  
**Kelli Bloom, Adult Services Director**  
**Hope Haven Children's Clinic and Family Center**  
**4600 Beach Blvd.**  
**Jacksonville, FL 32207**  
**904.346.5100 ext. 240 or**  
[kellib@hope-haven.org](mailto:kellib@hope-haven.org)  
  
**Pat Burr, Administrative Assistant**  
**Hope Haven Children's Clinic and Family Center**  
**4600 Beach Blvd.**  
**Jacksonville, FL 32207**  
**904.346.5100 ext. 276 or**  
  
[Patb@hope-haven.org](mailto:Patb@hope-haven.org)
2. The Selection Committee will review the applications, and contact eligible applicants to schedule an interview with the selection committee. Interviews are typically scheduled to occur in May. If accepted, assessments are completed with each intern to identify each person's employment skill set and interests. This information will assist with finding the best possible the Project SEARCH internship opportunities for the applicant to participate in while attending the program.
3. If accepted, participant must be able to pass a criminal background check and drug screen.

### **Please note:**

- The Selection Committee will include the Project SEARCH coordinator, instructor, representatives from the host business, and a Vocational Rehabilitation employment specialist.
- This application packet is utilized for both adult and high school transition candidates.
- All applicants must be eligible to receive employment services through Vocational Rehabilitation.

**Order of selection will be:**

1. Oldest students (18 – 21 age range) and young adults up to age 29
2. Students who have finished their necessary credits for graduation
3. Students who will benefit from participation in a variety of internships
4. Students who are interested in using public transportation to access Project SEARCH
5. **Students who desire to work competitively at the end of the Project SEARCH program.**

**Project SEARCH Application Packet Checklist**

**\*PLEASE NOTE\***

**ALL THE REQUIRED DOCUMENTS MUST BE COMPLETED AND SENT TOGETHER FOR APPLICATION TO BE CONSIDERED**

- Completed Application Packet
- Photo
- Current Individual Education Plan (IEP) including Transition Goals, if applicable
- Shot/Immunization Record
- High School Transcript
- Copy of High School Diploma
- Transcript or certificate from any other formal training
- Attendance Record

**Return completed Packet to:**

**Kelli Bloom, Project SEARCH Coordinator  
Hope Haven Children's Clinic and Family Center  
4600 Beach Blvd.  
Jacksonville, FL 32207  
904.346.5100 ext. 240 or  
[kellib@hope-haven.org](mailto:kellib@hope-haven.org)**

**Pat Burr, Administrative Assistant  
Hope Haven Children's Clinic and Family Center  
4600 Beach Blvd.**

**Jacksonville, FL 32207  
904.346.5100 ext. 276 or**

**[Patb@hope-haven.org](mailto:Patb@hope-haven.org)**

## Hope Academy Project SEARCH Recruitment Timeline 2011-2012 School Year



- + Applications due April 15, 2011
- + Selection committee meeting and applicant interviews-May 2011
- + Acceptance letters sent to families, VR Counselors, Support Coordinators May 2011
- + Family Orientation in early August
- + Program begins August 22nd

Goal: 12 participants per class

**For more information contact: Kelli Bloom**  
904.346.5100 ext. 240  
[kellib@hope-haven.org](mailto:kellib@hope-haven.org)

**APPLICATION FOR ADMISSION**

*Please complete and return to Hope Haven*

**A. Personal Data**

Name \_\_\_\_\_  
 Last First Middle

Applicant SS# or ID#: \_\_\_\_\_

Address: \_\_\_\_\_  
 Street City Zip Code

District of Residence: \_\_\_\_\_ School Currently Attending: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  Male  Female

Legal Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

\*Proof of Guardianship will be required upon acceptance.

Parent/Guardian Name: \_\_\_\_\_ Parent/Guardian e-mail: \_\_\_\_\_

Address: \_\_\_\_\_  
 Street City Zip Code

Parent/Guardian Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

**B. Parent/Student Information:**

1. A student cannot graduate from high school unless all requirements of the affiliated school are met.

**A two-week trial period will be required of all accepted enrollees. The parent and student agree to comply with this procedure.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

**C. Affiliated Counselor Use Only:**

Please attach transcript and most recent report card

Total Credits to Date \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

Does the student have the necessary credits for graduation?  Yes  No

List Course Deficiencies: 1. \_\_\_\_\_ 2. \_\_\_\_\_  
 3. \_\_\_\_\_ 4. \_\_\_\_\_

Days Absent: 11<sup>th</sup> \_\_\_\_\_ 12<sup>th</sup> \_\_\_\_\_

Comments about Attendance: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Counselor Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Counselors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**EMPLOYMENT BACKGROUND:**

How do you want to be employed in the community upon completion of Project SEARCH?

Full time  Part time

List jobs you do or have done in school or in the community:

| Employer | Job Title | Job Duties           | Supervisor Name | Contact Number | Paid                     | Unpaid                   |
|----------|-----------|----------------------|-----------------|----------------|--------------------------|--------------------------|
|          |           | 1.<br>2.<br>3.<br>4. |                 |                | <input type="checkbox"/> | <input type="checkbox"/> |
|          |           | 1.<br>2.<br>3.<br>4. |                 |                | <input type="checkbox"/> | <input type="checkbox"/> |
|          |           | 1.<br>2.<br>3.<br>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:

---

---

Have you participated in or been exposed to employability training?

Yes  No

If yes, please describe:

---

---

**TRANSPORTATION:**

How do you plan to get to Project SEARCH?

City  JTG/JTA  Parents  Drive Self   
Bus

## SERVICE AGENCIES:

Do you have a Vocational Rehabilitation Counselor?

Yes  Name \_\_\_\_\_ Phone Number: \_\_\_\_\_

No

Are you eligible for services from the Agency for Persons with Disabilities/Med Waiver?

Yes  Name of Support Coordinator \_\_\_\_\_ Phone Number: \_\_\_\_\_

No

Are you eligible to receive the McKay Scholarship?

Yes  No

If yes, has a letter of intent been completed on the Florida School Choice Website?

Yes  No

**If using McKay, please provide the name, phone #, and Social Security number of the parent who filed the letter of intent:**

Parent Name: \_\_\_\_\_

SS#: \_\_\_\_\_

Phone #: \_\_\_\_\_

Are you receiving SSI?

Yes  No

Are you participating in the Ticket-to-Work Program?

Yes  No

What is your annual household income? \_\_\_\_\_

How many people reside in the home? \_\_\_\_\_

## Medical History:

Medications/ dosage/ Time of day taken by student

| Medication | Dosage | Time of day | Side effects |
|------------|--------|-------------|--------------|
|            |        |             |              |
|            |        |             |              |
|            |        |             |              |

Allergies:

---

---

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

---



---

Please list any limitations that may impact obtaining and sustaining paid employment:

---



---

**This section is to help us get to know the applicant better. Please circle the description that best applies to the applicant.**

|  |   |  |   |   |  |
|--|---|--|---|---|--|
| <b>Independent Daily Living Skills</b>   | Applicant has very poor or no independent daily living skills                           | Applicant is able to complete a few daily living activities with many prompts.                     | Applicant is able to complete a moderate amount of daily living activities with multiple prompts. | Applicant is able to complete most daily living activities with few prompts.  | Applicant lives independently  |
| <b>Physical Ability</b><br><ul style="list-style-type: none"> <li>▪ <b>Mobility</b></li> <li>▪ <b>Stamina</b></li> </ul> | Student has limited physical abilities and stamina to perform the job successful        | Student has the mobility to perform some of the tasks with limitations                             | Student has low but improving mobility and stamina  | Student has the mobility and stamina to perform all tasks with accommodations:<br>A cart to help transport mailings or a wheelchair/scooter for mobility. | Student has the mobility and stamina to perform all tasks successfully   |
| <b>Appearance and Professional Presentation</b>  | Student does not possess any personal hygiene skills and clothes are not neat and clean | Student needs assistance in making sure clean clothes are worn daily. Personal appearance may vary | Student wears neat and clean clothing and has appropriate grooming on most days                   | Student is neat, clean and well groomed but makes inappropriate clothing choices for work   | Student possesses good personal hygiene skills and will always arrive to Project SEARCH and/or work neat and clean |

|   |  |  |  |   |  |
|---|--|--|--|---|--|
|   |  | each day   |  |   |  |
| <b>Appropriate Social and Behavior Skills</b> | Student frequently displays inappropriate social and behavior skills | Student periodically displays inappropriate social and behavior skills | Student is appropriate in the presence of adult supervision but is not independent | Student exercises independence in social and behavior skills in most situations | Student exercises independence in social and behavior skills in all (or nearly all) situations |

|  |   |  |  |   |  |
|--|---|--|--|---|--|
| <b>Problem Solving and Conflict resolution</b> | Student has no independent problem solving and conflict resolution skills | Student has difficulty in problem solving and conflict resolution skills             | Student has demonstrated capacity to expand problem solving and conflict resolution skills                           | Student possesses good problem solving skills   | Student possesses good problem solving skills and initiates problem solving independently              |
| <b>Pace and Work Quality</b>                   | Student seldom gets work finished in allotted time period.                | Student is methodical which affects pace and output                                  | Student can achieve appropriate work pace but quality suffers or work quality is sufficient but quantity is affected | Pace and quality of work are mildly deficient but improving   | Student is able to achieve both appropriate quality and quantity of work                               |
| <b>Computer Skills</b>                         | Student has no computer skills.   | Student has basic knowledge of keyboard and keyboard functions.                      | Student can access internet, utilize search engines for information and for entertainment .                          | Student can utilize Microsoft products with basic proficiency.  | Student can utilize Microsoft products, can save, edit and retrieve documents, with basic proficiency. |
| <b>Verbal Communication</b>                    | Student has no way of clearly communicating with others                   | Student is not fluent or easily understood even with assistive technology or support | Student can be understood with 1-2 repetitions or when asked to speak more clearly                                   | Student uses a voice box or other assistive technology to communicate and is understood using these tools | Student has the ability to communicate with all others and be understood easily                        |
| <b>Interpersonal Communication</b>             | Student has no grasp of interpersonal relationships                       | Student uses appropriate body language (smiles, waves, etc.) but does not            | Student engages in some conversation when prompted   | Student engages in conversation independently but the topic is inappropriate                              | Student uses appropriate tone of voice, body language and conversation topics                          |

