



# Applicant Name

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**SUBMIT** the completed application to:

<b>Nancy Eaby</b>	Lu Merrick
Project SEARCH Program Director	Director of Post High School Programs
<b>SEEC</b>	<b>The Ivymount School</b> 11614 Seven Locks Road Rockville, MD 20854
<a href="mailto:PSRecruitment@seeonline.org">PSRecruitment@seeonline.org</a>	<a href="mailto:lmerrick@ivymount.org">lmerrick@ivymount.org</a>

**ALL THE REQUIRED DOCUMENTS MUST BE COMPLETED AND SUBMITTED TOGETHER FOR APPLICATION TO BE CONSIDERED. (including all email and phone contact info)**

- Current Photo of applicant
- Copy of High School diploma or certificate of completion
- Current IEP for applicants who are currently in school
- Person Centered Plan (PCP) for applicants who currently receive DDA/DDS supports
- Most Recent Psychological evaluation/report (school or private therapist/counselor)
- Applicant's Work/Volunteer History/resume (including details about specific work tasks)
- Proof of funding (i.e., eligibility letter from DDA; service funding plan for DORS/RSA).
- Copy of state issued photo ID (front and back)
- Copy of Social Security card
- Copy of Medicaid card
- Copy of Metro ID (if available)
- Parent Questionnaire completed

**Applications will not be processed unless all required documentation has been provided.**

## **Application Process Logistics**

- ✿ The Selection Committee - consisting of our Business Partners, representative(s) from SEEC, representatives from The Ivymount School, and representatives from: Maryland and District of Columbia Vocational Rehabilitation agencies, Maryland and District of Columbia Developmental Disabilities Administration - will review the applications, matching the applicant's skill sets and interests, work and/or volunteer experience with the Project SEARCH Program requirements.
- ✿ Acceptance into the Project SEARCH program is NOT a guarantee of employment.
- ✿ If accepted, all applicants are required to attend an Open House in the summer at the host business site to learn about the work-place culture, possible internships and meet the instructor and job coaches (Specific date to be scheduled)
- ✿ Vocational Rehabilitation Counselors will complete eligibility and develop Individual Plan of Employment - summer before program starts.
- ✿ Maryland Residents Only – must have DDA funding in place prior to start date of program or have private pay agreement established with Ivymount.



Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Current Service Provider Information:**

Are you currently working with a Service Provider/adult agency? Yes  No

Agency contact/consultant's name: \_\_\_\_\_

If "Yes" provide agency name: \_\_\_\_\_

**FUTURE EMPLOYMENT PREFERENCES and BACKGROUND:**

Do you want to get a job upon completion of the program? Yes  No

Does your family support the goal of community employment? Yes  No

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

Full time  Part time

Do you plan to work during the year, in addition to attending the Project SEARCH Program?

Yes  No

If yes where? \_\_\_\_\_ How many days/ hours? \_\_\_\_\_

Are you able to pass a background check?

Yes  No

If no, why? \_\_\_\_\_

List current or past jobs you have had outside of your school program (volunteer or paid):

Employer	Job Title	Job Duties	Supervisor Name	Contact Number	Paid	Unpaid
		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 quit or been fired from a job?

Yes

No

If yes, please explain:

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Can you get to school, work or other appointments on time and independently?

Yes

No

Are you willing to use public transportation to get to and from the program? Yes  No

Do you and your family understand that it is a requirement of the program to either use public transportation (preferred), or make private arrangements to and from program? Yes  No

Do you get back to work/class on time after breaks and lunch? Yes  Sometimes  No

Are you able to stay on task until the job is finished? Yes  Sometimes  No

Can you return to a task and finish it if you are interrupted in the middle? Yes  Sometimes  No

Are you comfortable asking your boss or co-workers for help when needed? Yes  Sometimes  No

What are your strengths? \_\_\_\_\_

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Please list any strategies that have been successful and lead to greater independence for you:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**FUNDING & SERVICES AGENCIES: (Complete information needed)**

Do you have a Vocational Rehabilitation Counselor?

(MD-DORS or DC-RSA) Yes  No

Counselor's  
Name

Phone Number:

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Have you applied to DDA (Maryland residents) for funding? Yes  Don't Know  No

DDA funding is the main funding source for participation in Project SEARCH. Without secured DDA funding in place, applicants may consider private pay as an option.

Are you eligible for long-term funding? (MD DDA Transitioning Youth Services or DC DDS Services)

Yes Service Co-ordinator

Phone Number: \_\_\_\_\_

No

Do you have Medical Assistance (Medicaid)?

Yes Medicaid # \_\_\_\_\_

No

Do you have SSI or SSDI?

Yes SSN # \_\_\_\_\_

No

### MEDICAL/PHYSICAL SUMMARY

Do you take medications regularly?

Yes  Please complete table below

No

Medications/ Dosage/ Time of day taken by applicant

Medication	Dosage	Time of day	How does it help?	Taken Independently Y/N

How long can you be on your feet? \_\_\_\_\_

**What assistive devices do you use?** Glasses or contacts  Hearing aid(s)  Assistive Tech device

Walking or mobility aid or mobility aid  other: \_\_\_\_\_

### BEHAVIORAL/PSYCHOLOGICAL/EMOTIONAL SUMMARY:

**\*Please make sure you include most recent Psychological report or therapist summary.**

Do you have any behaviors that need support in order to have a successful job placement?

Yes

No

**Please Explain:**

\_\_\_\_\_  
\_\_\_\_\_

Do you see a specialist such as a psychologist, therapist, social worker/counselor, psychiatrist, neurologist, etc. and if yes, how often/how does it help?

Yes

No

**Please Explain:**

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In what setting do you feel you are at your best? \_\_\_\_\_

\_\_\_\_\_

What is the toughest/most challenging part of your day/week? \_\_\_\_\_

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\_\_\_\_\_

**\*NEATLY\* List Three References other than family (REQUIRED TO PROCESS APPLICATION):**

	Name	Type of Reference	Phone Number	Email Address
1.				
2.				
3.				

**If the applicant did not complete the application themselves please identify the person assisting the student/individual to complete this application.**

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Name and Organization	Relation to Applicant	Relation to Applicant	Date
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Signature

## APPLICANT RESPONSE QUESTION

Why do you want to participate in Project SEARCH? (Complete in **your own words** and/or person assisting will write the responses **in the applicant's own words**)

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### **PROGRAM PREFERENCE:**

The selection committee will make recommendations for placement in the Project SEARCH program that we believe best matches an applicant's skills and interests and gives that applicant the best opportunity for employment. Indicating a preference for a specific program is no guarantee that if accepted you will be placed in that location nor is it a guarantee of employment at that location. If you are only interested in one program then only indicate that program as your preference, understanding that it may limit your options for placement.

If accepted into Project SEARCH, I am only interested in attending the following program: \_\_\_\_\_.