



# TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

We are excited that you are interested in applying to the Toledo Transition (T2) Program at The University of Toledo. The T2 admissions process occurs in five phases including Application, Document Review, Interview, Determination and Confirmation.

## APPLICATION ACCEPTANCE

Applications will be accepted beginning November 1 for fall semester the following academic year.

## PHASE ONE: COMPLETE THE APPLICATION

The completed applications will be reviewed as received.

### APPLICATION CHECKLIST

- Complete T2 application containing signature of the student or guardian as appropriate.
- Personal Essay
- Transcript of the applicant's high school coursework (can be unofficial)
- Copy of the applicant's IEP or 504 Plan. Should include testing accommodations and discipline records (if applicable)
- Most current Evaluation Team Report (ETR) or up-to date psychological evaluation within past two years; must include IQ scores
- Two letters of recommendation from non-family members who have known the applicant for at least one year. Recommendations should include at least one from an educator and students are encouraged to include an employer or volunteer supervisor.

## PHASE TWO: DOCUMENT REVIEW

The Document Review identifies the applicant's potential for success as a University of Toledo student in the TO program. During this phase, the program director may contact the applicant, parents and references for additional information or clarification. If the applicant meets admission requirements, the application documentation will be forwarded on to the admission committee.

## PHASE THREE: INTERVIEW

The admission committee will conduct individual interviews with applicants and their families.

## PHASE FOUR: DETERMINATION

The admission decision is made in writing to the applicant. If the determination is that the applicant does not meet the admission requirements, the applicant will receive recommendations for growth.

## PHASE FIVE: CONFIRMATION

If selected for admission, the applicant will be given additional instructions from The University of Toledo Admissions. Applicant will submit fee to confirm enrollment for the fall semester along with a deposit for the required T2 Summer COATS (College Orientation and Assessment of Transition Skills) program.

*The University of Toledo does not discriminate on the basis of disability, race, color, religion, national origin, ancestry, medical condition, genetic information, marital status, sex, age, sexual orientation, veteran status or gender identity and expression in its programs and activities.*



# TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

**Applicant's Name:**

Address:

Email:

Date of Birth:

Phone Number:

Cell Phone Number:

Are you your own guardian? Yes  No

If no, who is your guardian?

**Parent/Guardian 1 Name:**

Parent/Guardian 1 Address:

Parent/Guardian 1 Phone Number:

Parent/Guardian 1 Email:

Relationship to Applicant:

**Parent/Guardian 2 Name:**

Parent/Guardian 2 Address:

Parent/Guardian 2 Phone Number:

Parent/Guardian 2 Email:

Relationship to Applicant:



# TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

## RELEASE OF INFORMATION (IF THE APPLICANT IS OWN GUARDIAN)

By signing, I consent that members of the T2 admission committee can have access to my high school records, all content of this application, and may speak with and/or obtain relevant records from family member, stakeholders, references, school and agency personnel as a part of my application review.

Applicant Signature:

Date:

## IF THE APPLICANT IS NOT OWN GUARDIAN

By signing, I agree that members of the T2 admission committee can have access to my child's high school records, all content of this application, and may speak with and/or obtain relevant records from family members, stakeholders, school and agency personnel as a part of my child's application review.

Parent/Guardian Signature:

Date:

## EDUCATION

Name of High School(s) Attended:

Address(es) of High School(s) Attended:

(Anticipated) Date of graduation or receipt of high school diploma/equivalent:

Did/Will receive: (check boxes)

- High School Diploma
- Equivalent Certificate

Post-High Schools Attended (please include transcript):

Level of inclusive high school participation: check boxes

- Fully included (no special education classes)
- Special education classes only
- Spent majority of my time in inclusive setting
- Spent majority of my time in special education classes

List or attach accommodations used in general education classes according to IEP:

Do you currently receive any emotional support services such as counseling? Yes  No

Would you be willing to continue these services if accepted to the program? Yes  No

What hobbies, clubs, sports or other leisure activities do you participate in?



# TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

## EMPLOYMENT AND VOLUNTEER EXPERIENCES

Please provide information regarding any paid employment, unpaid employment, school-based employment training and internships. Attach a resume and references if applicable.

Employer/Internship:

Start Date:

End Date:

Average hours per week:

Supervisor Name:

Phone:

Email:

Job Title:

Job Type:

Paid  Unpaid/Volunteer

How did you obtain this job?

Responsibilities:

What did you need help with?

What did you enjoy the most?

Reason(s) for Leaving:

---

Employer/Internship:

Start Date:

End Date:

Average hours per week:

Supervisor Name:

Phone:

Email:



## TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

Job Title:

Job Type:

Paid  Unpaid/Volunteer

How did you obtain this job?

Responsibilities:

What did you need help with?

What did you enjoy the most?

Reason(s) for Leaving:

---

Employer/Internship:

Start Date:

End Date:

Average hours per week:

Supervisor Name:

Phone:

Email:

Job Title:

Job Type:

Paid  Unpaid/Volunteer

How did you obtain this job?

Responsibilities:

What did you need help with?

What did you enjoy the most?

Reason(s) for Leaving:



## TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

### SERVICES AND SUPPORT

Do you currently or have you received services from Vocational Rehabilitation services?

Yes  No

Do you currently or have you received services from the Board of Developmental Disabilities services?

Yes  No

Do you receive a Medicaid waiver for services or support?

Yes  No

Do you have a personal care attendant that helps you?

Yes  No

If yes, explain what service(s) they provide.

Please describe how your disability or medical/health needs impact your activities of daily living.



## **TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION**

### **STUDENT GOALS FOR FUTURE (TO BE COMPLETED BY APPLICANT)**

Please create a personal essay that answers the following questions. Applicants may submit essays using multimedia (e.g., Power Point, video), electronic or written formats. This is an excellent opportunity to show your writing and critical thinking skills as well as your creativity.

- What are my goals for the future and how would attending the Toledo Transition Program at The University of Toledo help me fulfill my goals?
- What type of job would I like after graduation and how would participating in T2 and being a UToledo student help me achieve my goals?
- What courses interest me or what would I like to learn that will help me meet my goals?
- What type of clubs or activities would I like to participate in as a college student that will help me meet my goals?
- What are some areas in my life that I need to grow in to become more independent and how will attending T2 help me to do this?

Please use this space to provide us with any additional information about yourself that you wish to share.



# TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

## SKILLS INVENTORY (To be completed by Applicant/Parent/Family/Guardian/Support Person)

Applicant Name:

Person Completing Form:

Please fill in the appropriate circle for each skill.

	Requires complete assistance	Needs moderate assistance	Needs some assistance	Needs minimal assistance	Completely independent
Able to negotiate/find way around campus environment					
Able to order and purchase from a restaurant cafeteria or store					
Able to do laundry, light cooking, cleaning					
Able to stay alone at home or in the community					
Knows, handles and takes medication					
Able to use email to communicate					
Communicates needs in an appropriate manner					
Engages with peers socially — personal space, conversation, respect					
Copes with conflict					

Comments on any of the selections above:



## TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

	Requires complete assistance	Needs moderate assistance	Needs some assistance	Needs minimal assistance	Completely independent
Fosters healthy relationships with peers – communication, dating, etc.					
Distinguishes between friend and stranger					
Handling money; counting change/bills, using ATM, checkbook, budgeting,					
Computer skills: word processing, typing, internet search					
Knows how she/he learns best					
Motivation to learn and persist on new tasks					
Knows and can verbalize and/or write personal info: name, address, birthdate, phone, SSN, etc.					
Takes initiative					
Sets obtainable goals					
Uses good judgment skills in an emergency					
Able to safely cross intersections that have pedestrian signals					
Initiates and completes homework					

Comments on any of the selections above:

## TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

	Requires complete assistance	Needs moderate assistance	Needs some assistance	Needs minimal assistance	Completely independent
Accepts constructive feedback					
Manages and keeps up with personal items (e.g., phone, backpack)					
Able to cross intersections that do not have pedestrian signals					
Copes well with stress					
Copes well with change					
Uses calming strategies to manage emotions					
Manages own sensory needs					
Gets up independently, goes to bed independently					
Takes care of personal hygiene					
Able to use public transportation					
Ability to relate to others					
Asks for help, clarification or questions					

Comments on any of the selections above:



## TOLEDO TRANSITION PROGRAM APPLICATION FOR ADMISSION

	Requires complete assistance	Needs moderate assistance	Needs some assistance	Needs minimal assistance	Completely independent
Able to use phone to communicate with others call or text					
Uses social media safely and respectfully					
Persists when faced with a challenging task					
Able to follow verbal directions					
Able to follow written directions					
Able to keep a daily schedule with due dates and assignments					
Manages own leisure time					

Comments on any of the selections above:

Has applicant utilized any assistive technology?

Yes  No

If yes, what?

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