

APPLICATION TO PARTICIPATE

REVIEWER INFORMATION		
Prospective Student's Name:		
Completed By:	Relationship:	
Date:		
PERSONAL INFORMATION FOR PROSPECTIVE STUDENT		
Date of Birth:	Gender: Male Female	Address:
Primary Phone Number:	Primary Communication: <input type="checkbox"/> Vocal Verbal <input type="checkbox"/> iPad/Communication Device <input type="checkbox"/> Sign Language <input type="checkbox"/> Other (Explain: _____)	
Email:		
Mobility: <input type="checkbox"/> Able to Walk Independently <input type="checkbox"/> Uses a Walker <input type="checkbox"/> Uses a Wheelchair <input type="checkbox"/> Other (Explain: _____)	Toileting: <input type="checkbox"/> Uses Restroom Independently <input type="checkbox"/> Requires Assistance with Toileting <input type="checkbox"/> Other (Explain: _____)	
TEAM MEMBER INFORMATION (as applicable)		
Case Manager Agency: Name: Phone Number: Email:	Parent/Guardian Agency: Name: Phone Number: Email:	
Behavior Specialist/Analyst Agency: Name: Phone Number: Email:	Psychologist/Psychiatrist Agency: Name: Phone Number: Email:	
Residential Provider Agency: Name: Phone Number: Email:	Adult Day Training Provider Agency: Name: Phone Number: Email:	
Primary Physician Agency: Name: Phone Number: Email:	Other Agency: Name: Phone Number: Email:	

MENTAL & PHYSICAL HEALTH INFORMATION

Psychiatric Diagnoses:

Physical Health Concerns (including allergies, etc.):

CLASSROOM SETTING

Does the prospective student have any sensory issues that we should know about?

Explain:

What motivates the prospective student in an educational setting?

Explain:

LIFE HISTORY

Positive Introduction: *Include what people like and admire about the person, closest relationships held by the person, positive social roles held, best possible future as defined by the participant and those who support him.*

Family of Origin: *Include information regarding mother, father, siblings, and any other family members or natural supports that either had significant involvement historically, or have significant involvement now. Summarize current family contact and relevant relationships to the individual. Include information about family members who might like to be further involved with the participants, and projected efforts to assist.*

Historical Information: *Include developmental milestones, place of birth, town and state of origin, school participation, relevant childhood experiences, and post-school experiences.*

LIFE HISTORY (continued)

Previous Supports and Services: *Include any in-home services, previous institutionalizations, and the information related to the duration and intensity of those supports.*

Current Life Stressors: *Include any stressors at home, community, residence, day training programs, etc. as they apply.*

Current Community Involvement: *Include any non-segregated activities or groups with which the participant is regularly involved, and supports needed to maintain involvement.*

Current Routines and Life Practices: *Include typical routines of daily life, special observances, night life and sleeping patterns. Include preference, likes & dislikes, and what works/what doesn't work in regular routines. This section should detail what life typically looks like as of the date of this application.*

Best Life Recommendations and Efforts: *Include the student's wishes and desires for the future, any barriers to the acquisition of those desires, and current efforts to support active community involvement and increased quality of life.*

CURRENT BEHAVIORAL FUNCTIONING/CONCERNS

Indicate current behavioral functioning as it relates to challenging/problematic behaviors as it applies

- Disruptive Behaviors (verbal outbursts, property destruction, etc.)
- Agitated Behaviors
- Assaultive Behaviors (physical aggression towards others)
- Self-Injurious Behaviors
- Self-Neglecting Behaviors

Explain behavior concerns (i.e., what challenging behaviors look like): _____

By signing this document, I confirm that all scores and information provided is accurate to the best of my knowledge:

Name: _____

Signature: _____

