

FALL 2023 APPLICATION

Thank you for considering our program!

Admissions Criteria

Opportunity Orange Scholars is an individualized two-year, residential, non-degree certificate program for students with a primary or secondary diagnosis of intellectual disability. We accept students between the ages of 18 and 26. Transfer credits from other colleges or postsecondary programs do not apply.

You must meet all of the following requirements to apply for Opportunity Orange Scholars:

- Are 18 to 26 years of age by the first day of the fall 2023 semester of admission.
- Have a diagnosis of intellectual disability and do not meet the criteria as a degree-seeking student.*
- Personal desire to gain necessary skills for self-determination, interdependent living, community engagement, and employment.
- Ability to identify basic support needs.
- Self-manage daily activities including medication. **

* The program adheres to the American Association on Intellectual and Developmental Disabilities (AAIDD) definition of intellectual disability as "a disability characterized by significant limitations both in intellectual functioning and in adaptive behavior as expressed in conceptual, social, and practical adaptive skills. This disability originates before the age of 22." Evidence of significant limitations in intellectual and cognitive functioning and adaptive behavior must be provided in the form of a psychoeducational evaluation, the most recent Individualized Education Plan (IEP), and/or a formal letter from a licensed professional with expertise in intellectual disability assessment.

**IMPORTANT NOTE: Opportunity Orange Scholars does not provide 24/7 supervision for students. Parents and Applicants must trust scholars can make safe decisions without 24/7 supervision and structured programming on evenings and weekends. The safety of our students drives every decision made by our staff. A student may be dismissed from the program if, in the professional opinion of our staff, the student is displaying behavior that could endanger themselves or someone else.

Application Process

ALL APPLICATIONS ARE DUE ON **DECEMBER 1, 2023!**

Opportunity Orange Scholars WILL NOT review your application until all THREE recommendation forms have been received. References should not be family members. References may be contacted by Opportunity Orange Scholars to ask more about your ability and desire to be successful in college. Listing any information that is false or incorrect on this application is not allowed.

- All of your application materials will be destroyed immediately after final decisions are made if your application is not accepted.
- Please submit ALL of your information in the online application portal.
- Admission to Opportunity Orange Scholars is selective. Meeting basic requirements does not guarantee admission to the program.

STUDENT INFORMATION (text box)

| | the state of the s |
|-------------------|--|
| 1. Fi | rst Name |
| 2. M | iddle Initial |
| 3. La | st Name |
| 4. Pr | referred Name |
| 5. Ag | ge |
| 6. St | udent Date of Birth |
| 7. St | udent Phone Number |
| 8. St | udent Email Address |
| 9. St | udent's Primary Diagnosis |
| 10. | Student's Secondary Diagnosis, if applicable |
| 11. | Address |
| 12. | City |
| 13. | State |
| 14. | Zip Code |
| 15. | Email Address |
| | |
| SUPPO | RT SERVICES |
| 16. <i>N</i> o | Do you have a legal guardian? ote: Having a legal guardian does not exclude you from applying for OOS Ves No |
| 17. | If 'yes', please list the name of your guardian? |
| 18 | What is your relationship to your guardian? |

| 19. | What type of guardian do you have: General - A "general" guardian has full legal responsibility for you and your property. Limited - A "limited" guardian has limited legal responsibility for you and/or your property. |
|-----------|--|
| 20. Se | Do you receive services through Developmental Disabilities ervices (DDS) in Oklahoma? Yes No I don't know. |
| 21. Se | Are you a client of Oklahoma's Department of Rehabilitation ervices (DRS)? Yes No I don't know. |
| FAMILY | INFORMATION |
| 22. | Who do you live with? Both parents Mother Father Sibling(s) Guardian(s) Other: |

Family/Guardian/Emergency Contact #1:

- 23. Relationship to Student
- 24. First Name
- 25. Last Name
- 26. Home Phone
- 27. Cell Phone
- 28. Address
- 29. City
- 30. State
- 31. Zip Code
- 32. Occupation/Employer
- 33. Work Phone
- 34. Email Address

Family/Guardian/Emergency Contact #2:

- 35. Relationship to Student
- 36. First Name
- 37. Last Name
- 38. Home Phone
- 39. Cell Phone
- 40. Address
- 41. City
- 42. State
- 43. Zip Code
- 44. Occupation/Employer
- 45. Work Phone
- 46. Email Address

Education History

- 47. <u>High School Information</u>: Please list the information for any high school you have ever attended in the table below.
 - \Box This does not apply to me. I did not attend high school.

| Name of High School | Location (City, State) | Grades Attended | What years did you attend each high school? | Did you graduate? What type of diploma or certificate did you receive, if so? |
|------------------------|---------------------------|--------------------|--|--|
| | | | to | |
| | | | to | |
| | | | to | |

- 48. <u>College or University Information</u>: Please list the information for any college you have ever attended in the table below.
 - ☐ This does not apply to me. I have never attended college.

| Name of College/University | Location (City, State) | What years did you attend the university? | What classes did you take? |
|----------------------------|---------------------------|---|----------------------------|
| | | to | |
| | | to | |

| other educaticollege) you be a project SEARG | ional or train nave ever att CH). | ing programs (beside lended in the table l | les high school or pelow (for example, and any other training |
|--|---|--|--|
| Name of School/Program | Location (City, State) | What years did you attend this school/program? | Did you graduate? What type of diploma, certificate, or credentials did you receive, if so? |
| | | to | |
| | | to | |
| | | to | |
| 50. Did you pa during high se □Yes □ No | - | ny teams, clubs, or | other activities |
| • • • | - | pes of teams, clubs high school? | s, or activities you |

Employment History

| were p trainin | aid or not page or internsh mployment extensions es lo | aid, any jobs nips. perience is NC | is may include through you of the second sec | ur school, or | r any |
|-------------------|---|---|--|--------------------------------|-------------------------------|
| 53. Em r | oloyer #1 | | | | |
| Company Name | Location (City, State) | What was your supervisor's name? | Supervisor's Phone Number AND Email | What was your job title? | When did you work here? |
| | | | | | From to |
| | at were you | | for at this jol o? | o? | |
| □ P | • • | nent | ted) How mu | uch money d | łid you |

57. Why did you leave this job?

58. **Employer #2**

| Company Name | Location (City, State) | What was your supervisor's name? | Supervisor's Phone Number AND Email | What was your job title? | When did you work here? |
|-----------------|---------------------------|---|--|--------------------------------|-------------------------------|
| | | | | | From to |

| 59. | What were you responsible for at this job? |
|-----|--|
| 60. | How did you find/get this job? |
| 61. | What type of employment was this job? ☐ Paid employment ■ (drop down, if selected) How much money did you make per hour? ☐ Internship ☐ Volunteer |
| 62. | Why did you leave this job? |
| 63. | Describe any volunteer experiences you have had: |

STUDENT QUESTIONNAIRE

This section will help us learn more about you and your goals. The section is broken down into two parts: (1) video responses and (2) short answer questions.

Section 1: Video Responses

You will be asked to submit ONE (1) video of yourself answering some of the application questions. Your video does not have to be professionally made. You will create your video in our application system, and will have the chance to make a practice video.

Your video should be NO MORE THAN 6 MINUTES EACH in length.

64. VIDEO RESPONSE - Introduction Video

- Prompt #1: Why are you interested in applying for Opportunity Orange scholars, and what excites you about being a college student at OSU?
- Prompt #2: If selected to be a student in Opportunity Orange scholars, you will live on campus away from home. What do you think would be the best part about living away from home and your family if you go to OSU, and what do you think will be the hardest?

Section 2: Short Answer Questions

This section includes THREE (3) questions to help us learn more about you and your goals.

You should answer each essay question on your own, using your own skills and words. Decisions about admission to the OOS program are not based on grammar and spelling.

It is important that YOU complete your own application. It may be helpful to type your responses in a Word document first, and then copy/paste the text into the application.

Please be sure to answer ALL three questions. Your answers should be brief.

Please answer each of the following questions in FIFTY (50) words or less.

Click here for more information about this session.

- 65. **Question 1:** How did you learn about Opportunity Orange Scholars? (50 words max)
- 66. **Question 2:** What would be a job you would like to have one day and how do you think Opportunity Orange Scholars can help prepare you for that? (50 words max)
- 67. **Question 3:** If you were selected to participate in Opportunity Orange Scholars, what would be TWO (2) goals that you would like to work on while in the program? (50 words max)

Medical Independence

| 68. ir | Are you able to manage and take all of your medical needs, icluding medications, independently without any assistance? |
|-----------|--|
| | ☐ Yes |
| | ☐ No, I need assistance. |
| | \square This does not apply to me. I do <i>not</i> take any medications. |
| | |
| | |
| | |
| | |
| | |

Release and Exchange of Information

All of the written and submitted documentation to confirm a disability and to plan for appropriate services provided within this application will be kept confidential by Opportunity Orange Scholars and Oklahoma State University. However, it may be necessary for Opportunity Orange Scholars to exchange some information about you with other individuals on a need-to-know basis. This exchange will occur only with your written permission.

| 69 |). I,_ | (type name), give my |
|----|--------|---|
| | perm | ission to exchange information about me and my application |
| | with | offices/individuals checked below: |
| | | My previous school |
| | | My previous employer/supervisor |
| | | My parent(s)/guardian(s) |
| | | My references |
| | | Oklahoma Department of Vocational Rehabilitation |
| | | Oklahoma Developmental Disabilities Services |
| | | Oklahoma State University partnering offices/departments |
| | • | If 'yes' to Q16 (legal guardian): |
| | | Consent of Legal Guardian |
| | | In place of your signature, please type your full legal name: |
| | | |
| | | |
| | | |

Recommendation Forms

You must submit the contact information for THREE (3) references. These must include: (1) academic recommendation, (1) employment recommendation, and (1) character recommendation. See below for more details.

Once you have provided the contact information for each of your references, those individuals will be sent online recommendation forms by email. Recommendation forms should be completed by *non-family members* who have known you for *at least two years*.

** Your application will NOT be considered complete until we have received all three online recommendation forms from your references. It is YOUR responsibility to ensure your references receive and submit their forms before the due date.

70. **Academic Recommendation** - someone who can tell us about your educational and social experiences in school (for example: a teacher, school counselor, guidance counselor, principal, etc.)

| Name (First, Last) | |
|--------------------------------------|--|
| Position/Company | |
| Address: City, State | |
| How do you know this person? | |
| How long have you known this person? | |
| Email address | |

| Phone Number | |
|---|-----------------------------|
| Employment/Volunteer Recored in the service of the | |
| Name (First, Last) | |
| Position/Company | |
| Address: City, State | |
| How do you know this person? | |
| How long have you known this person? | |
| Email address | |
| Phone Number | |
| Social/Character Recommend about your character, social skills, e.g., pastor, coach, coworker, tec Name (First, Last) | , and ability to manage beh |
| | |
| Position/Company | |
| Address: City, State | |
| · | |

| | How long have you known this person? | | | | |
|--------|--|---|--|--|--|
| | Email address | | | | |
| | Phone Number | | | | |
| 73. I, | | | | | |
| | If 'yes' to Q16 (legal guident of Legal Guardian In place of your signature, present of the presen | ardian): ease type your full legal name: | | | |
| 74. | We all need help and support s complete this application? | • • | | | |

Conduct Information

Oklahoma State University is committed to a safe and ethical academic environment for all members of our community. As someone who is interested in applying to become a student at OSU, you are required to answer these following questions. Please be honest when answering. Answering 'Yes' to any question does not mean you cannot apply to the OOS program. However, it does mean your application will have to be reviewed by the Office of Student Support and Conduct.

If you have questions or need clarification about your responses below, please contact the Office of Student Support and Conduct at 405-744-5470 or email the Opportunity Orange Scholars program at ooscholars@okstate.edu.

Additional information about OSU's Student Code of Conduct, click here.

| 75. | Have you ever been suspended or expelled from any school as |
|-----|---|
| a | esult of a non-academic issue? |
| | □No |
| | □Yes |
| | If 'yes', please tell us more about that experience: |
| | |
| | |
| | |
| 76. | Do you have any pending felony charges? |
| | □No |
| | □ Yes |
| | |

| 77. | Have you been convicted, plead guilty, plead no contest, or |
|-----|--|
| ac | cepted a deferred judgment to any criminal felony charges? |
| | □No |
| | □Yes |
| | |
| | |
| 78. | Are you required to register your name and home address with |
| an | y local or state law enforcement agency (for example, as a |
| re | gistered sex offender)? |
| | □No |
| | □Yes |
| | |
| | |
| | |

Certification

I understand that this application is for admission to the Opportunity Orange Scholars program at Oklahoma State University and that by submitting an application today, I am not guaranteed a spot in the program. This application is only valid for the 2023-2024 term. This is not an application for admission as a degree-seeking, undergraduate freshman. I understand and agree that I will be bound by the program's regulations concerning application deadline dates and admission requirements.

I certify the information given in this application is complete and correct. All of the information, videos, essay responses, and documents submitted are my own. I understand that I may have support with my

application but that I am to answer the questions about myself to the best of my ability. I certify that the information I have provided is accurate, and I understand that if I were to submit information that was untrue, inaccurate, or misrepresented the ideas, writings, or words of someone else within this application, that my application could be denied.

If accepted into the program, I promise to fulfill all financial obligations to the institution which I may incur and hereby agree to abide by the policies of the Oklahoma Board of Regents and the rules and regulations of the university. Should any of the information in my application change prior to my enrollment at the university, I will immediately notify Opportunity Orange Scholars.

I give permission to any high school, university or college I have attended to provide enrollment and/or grade information if requested by Opportunity Orange Scholars and/or Oklahoma State University.

I understand the fee I submit with this application cannot be refunded.

I understand that as a student at Oklahoma State University, photography or video may be taken of me when in public spaces, attending campus events or in the classroom and could be used for University marketing and promotional purposes. I agree that any photograph or video that includes my face, voice, and appearance will become the property of OSU, and I will receive no financial payments for those materials.

| it 'yes' to Q | 16 (legal guardian): | |
|---------------|---------------------------|--------------------------|
| Consent of | Legal Guardian | |
| n place of | our signature, please typ | pe your full legal name: |
| | | |

UPLOAD SUPPORTING DOCUMENTS

- High-school transcript or equivalent documentation of school experiences - upload box
- Most recent Individualized Education Plan (IEP) upload box
- Psychoeducational Evaluation (completed within the last 3 years)
 upload box
- Proof of diagnosis (ex: most recent psychoeducational evaluation, signed letter from licensed clinical professional, etc.) - OOS requires documentation that lists a primary or secondary diagnosis of intellectual disability to meet admission criteria
- Letter(s) of Guardianship, if applicable (for example: court order for appointment guardian) upload box

APPLICATION FEE

| (Submit credit card/electronic check information) |
|---|
| Please be sure to double check that you have answered all of the questions and have submitted all supporting documents and files, including: |
| □ Complete Application □ Video □ Name and email of Recommendation #1 □ Name and email of Recommendation #2 □ Name and email of Recommendation #3 □ High-school transcript or documentation of prior schooling □ Individualized Education Plan (IEP) □ Psychoeducational Evaluation □ Proof of Guardianship, if applicable □ Application fee |
| I AM READY TO SUBMIT MY APPLICATION!! (button) |

AUTOMATIC RESPONSE:

Thank you for your interest in Opportunity Orange Scholars! Your application has now been successfully submitted.

Our review of applications will begin in early the first week of December, and you should hear from one of our team members, if selected for an interview, in early February.

Please do not contact Opportunity Orange Scholars staff regarding the status of your application.



Academic Recommendation

The person who sent this link to you is applying for Opportunity Orange Scholars (OOS) - an inclusive, post-secondary education program at Oklahoma State University. OOS is an individualized two-year, residential, non-degree certificate program at Oklahoma State University for students with a primary or secondary diagnosis of intellectual disability. We accept students between the ages of 18 and 26.

Applicants must have a strong desire to continue educational, employment, and campus life experiences through postsecondary education, with special interest in living and working as independently as possible in their community after completing the program with support from families or caregivers. As such, applicants need to have emerging or basic literacy skills in order to access course work.

It is important to note that OOS does not provide 24/7 supervision for students; therefore, applicants must be independent in all daily hygiene activities, able to self-manage and administer all medications on their own, and follow a schedule with minimal support.

For more information, please visit the **Opportunity Orange Scholars website**.

If you are filling out this form, you should be someone who can speak to the applicant's **educational and social experiences in school** (for example: a teacher, school counselor, guidance counselor, principal, etc.) **and who is currently or worked with the applicant during the last THREE years of their educational experience**. If this does not describe you/your role with the applicant, please communicate this with the student.

Contact Information

- Name (First, Last)
- Position/Company
- Phone Number
- How long have you known this applicant?
- How do you know this applicant?
- When was the last time you had frequent contact or communication with the applicant?

RECOMMENDATION FORM

The purpose of this form is to learn more about the applicant's experiences, abilities, and qualifications for Opportunity Orange Scholars. All of your answers will be kept completely confidential; applicants will not have access to the information you have provided today.

| lote: Applications are not considered complete until all recommendation forms have been submitted. | | | | | |
|--|--|--|--|--|--|
| ame of Applicant: (First/Last) | | | | | |
| Please provide an accurate assessment of the applicant's <u>current</u> skills and preferences: | | | | | |
| The applicant has a desire to continue educational, employment, and campus life experiences through postsecondary education. | | | | | |
| □ Agree | | | | | |
| □ Disagree | | | | | |
| Comments: | | | | | |
| | | | | | |
| The applicant has a desire to learn and participate in inclusive classroom and work settings. | | | | | |
| □ Agree | | | | | |
| □ Disagree | | | | | |

| Com | ments: _ | |
|-------|----------------------|---|
| | | |
| 3. | The applica | ant has expressed interest in living as independently as possible in their |
| | communit | ry at some point in the future. |
| | | □ Agree |
| | | ☐ Disagree |
| Com | ments: _ | |
| | | |
| 4. | The applica | Int has a desire to have a competitive job in the community. \square |
| | | Agree ☐ Disagree |
| Com | mants | _ |
| COIII | | |
| | | |
| 5. | The applica | nt has sufficient emotional and independent living skills necessary to |
| | participate | in coursework and campus life. |
| | | □ Agree |
| | | □ Disagree |
| Com | ments: | |
| | | |
| | | |
| 6. | The applica support. | nt is able to follow a schedule and navigate the school campus with minimal |
| | | □ Agree |
| | | □ Disagree |
| Com | ments: _ | |
| | | |
| | | |
| 7. | Please list t | three words to describe the applicant's personality/character. |
| | | · · · · · · · · · · · · · · · · · · · |

| 8. | Do you feel the applicant would benefit from a post-secondary educational experience? Why or why not? |
|-----|---|
| 9. | What strengths do you feel the applicant has that will benefit them if accepted into Opportunity Orange Scholars? |
| 10. | What are some challenges you feel the applicant may experience if accepted into the program? |
| | |

Please rate the statements below with the level of assistance the applicant requires for each task: Requires Completely Unknown Needs Needs Needs complete moderate minimal independent some assistance assistance assistance assistance 11. Learning new tasks 12. Coping with stress 13. Asking for help, clarification, or questions 14. Adjusting to new/ unfamiliar situations 15. Following a daily schedule 16. Meeting due dates/ deadlines 17. Engaging in appropriate social interactions

| 18. Regulating distress, particularly frustrations or disagreements with others | | | | | | | | | | |
|--|----------------|---------------|----------------|----------------|----------|--|--|--|--|--|
| 19. Meeting/engaging with new people | | | | | | | | | | |
| 20. Using technology, including a cell phone and computer | | | | | | | | | | |
| 21. Following written and verbal instructions | | | | | | | | | | |
| 22. Decision-making | | | | | | | | | | |
| 23. Problem solving | | | | | | | | | | |
| 24. Describe the supports educational tasks. | s or intervent | cions the app | licant uses to | o successfully | complete | | | | | |
| 25. Describe ONE of the applicant's academic achievements and what made it noteworthy. | | | | | | | | | | |
| 26. What else should we know when considering this applicant for our program? | | | | | | | | | | |
| | | | | | | | | | | |

(automatic response)

Thank you for taking the time to help this applicant complete their application by submitting this recommendation form.

Your support is appreciated!



Employment/Volunteer Recommendation

The person who sent this link to you is applying for Opportunity Orange Scholars (OOS) - an inclusive, post-secondary education program at Oklahoma State University. OOS is an individualized two-year, residential, non-degree certificate program at Oklahoma State University for students with a primary or secondary diagnosis of intellectual disability. We accept students between the ages of 18 and 26.

Applicants must have a strong desire to continue educational, employment, and campus life experiences through postsecondary education, with special interest in living and working as independently as possible in their community after completing the program with support from families or caregivers. As such, applicants need to have emerging or basic literacy skills in order to access course work.

It is important to note that OOS does not provide 24/7 supervision for students; therefore, applicants must be independent in all daily hygiene activities, able to self-manage and administer all medications on their own, and follow a schedule with minimal support.

For more information, please visit the **Opportunity Orange Scholars website**.

If you are filling out this form, you should be **someone who can speak to the applicant's experiences** as an employee at work and/or during volunteer activities. If this does not describe you/your role with the applicant, please communicate this with the t.

Contact Information

- Name (First, Last)
- Position/Company
- Phone Number
- How long have you known this applicant?
- How do you know this applicant?
- When was the last time you had frequent contact or communication with the applicant?

RECOMMENDATION FORM

The purpose of this form is to learn more about the applicant's experiences, abilities, and qualifications for Opportunity Orange Scholars. All of your answers will be kept completely confidential; applicants will not have access to the information you have provided today.

| Note: Applications are not considered complete until all recommendation forms have been submitted. |
|--|
| lame of Applicant: (First/Last) |
| Please provide an accurate assessment of the applicant's <u>current</u> skills and preferences: |
| The applicant has a desire to continue employment experiences through postsecondary education. |
| □ Agree |
| □ Disagree |
| Comments: |
| |
| 2. The applicant has a desire to learn and participate in inclusive work settings. \Box |
| Agree □ Disagree |
| Comments: |

| 3. | The applicant has expressed interest in working as independently as possible at a |
|---------|---|
| | competitive job in their community at some point in the future. |
| | ☐ Agree |
| C a 100 | ☐ Disagree |
| Com | ments: |
| | |
| 4. | The applicant has sufficient emotional skills necessary to participate in employment and campus life. |
| | □ Agree |
| | □ Disagree |
| Com | ments: |
| | |
| 5. | The applicant is able to follow a schedule with minimal support. ☐ Agree ☐ Disagree |
| Com | ments: |
| | |
| 6. | Please list three words to describe the applicant's personality/character. |
| 7. | Do you feel the applicant would benefit from a post-secondary educational experience? Why or why not? |
| 8. | What strengths do you feel the applicant has that will benefit them if accepted into Opportunity Orange Scholars? |

9. What are some challenges you feel the applicant may experience if accepted into the program?

| Please rate the statements b | elow with the | e level of assis | tance the app | olicant requir | es for each ta | sk: |
|---|------------------------------------|---------------------------------|-----------------------------|--------------------------------|------------------------|---------|
| | Requires complete assistance | Needs moderate assistance | Needs some assistance | Needs minimal assistance | Completely independent | Unknown |
| 10. Learning new tasks | | | | | | |
| 11. Coping with stress | | | | | | |
| 12. Asking for help, clarification, or questions | | | | | | |
| 13. Adjusting to new/ unfamiliar situations | | | | | | |
| 14. Following a daily schedule | | | | | | |
| 15. Meeting due dates/ deadlines | | | | | | |
| 16. Engaging in appropriate social interactions | | | | | | |
| 17. Regulating distress, particularly frustrations or disagreements with others | | | | | | |
| 18. Meeting/engaging with new people | | | | | | |
| 19. Using technology, including a cell phone and computer | | | | | | |

| 20. Following written and verbal instructions | | | |
|---|--|--|--|
| 21. Decision-making | | | |
| 22. Problem solving | | | |

| 23. | What tasks, duties, or responsibilities did/does this applicant typically engage in when working/volunteering? |
|-----|---|
| 24. | How would you describe this applicant's relationship with coworkers/co-volunteers? |
| 25. | Describe any supports or interventions the applicant uses to successfully complete tasks in the work/volunteer setting. |
| 26. | Describe ONE challenge the applicant overcame while working/volunteering with you. |
| 27. | In what areas have you seen the applicant grow since they started working with you? |
| | |

(automatic response)

Thank you for taking the time to help this applicant complete their application by submitting this recommendation form.

Your support is appreciated!



Social/Character Recommendation

The person who sent this link to you is applying for Opportunity Orange Scholars (OOS) - an inclusive, post-secondary education program at Oklahoma State University. OOS is an individualized two-year, residential, non-degree certificate program at Oklahoma State University for students with a primary or secondary diagnosis of intellectual disability. We accept students between the ages of 18 and 26.

Applicants must have a strong desire to continue educational, employment, and campus life experiences through postsecondary education, with special interest in living and working as independently as possible in their community after completing the program with support from families or caregivers. As such, applicants need to have emerging or basic literacy skills in order to access course work.

It is important to note that OOS does not provide 24/7 supervision for students; therefore, applicants must be independent in all daily hygiene activities, able to self-manage and administer all medications on their own, and follow a schedule with minimal support.

For more information, please visit the **Opportunity Orange Scholars website**.

If you are filling out this form, you should be someone who can speak to the applicant's **character**, **social skills**, **and ability to manage behaviors** (e.g., clergy, coach, coworker, etc.). If this does not describe you/your role with the applicant, please communicate this with the applicant.

Contact Information

- Name (First, Last)
- Position/Company
- Phone Number
- How long have you known this applicant?
- How do you know this applicant?
- When was the last time you had frequent contact or communication with the applicant?

RECOMMENDATION FORM

The purpose of this form is to learn more about the applicant's experiences, abilities, and qualifications for Opportunity Orange Scholars. All of your answers will be kept completely confidential; applicants will not have access to the information you have provided today.

| ote: Applications are not considered complete until all recommendation forms have been submitted. | | | | | | | |
|--|--|--|--|--|--|--|--|
| ame of Applicant: (First/Last) | | | | | | | |
| Please provide an accurate assessment of the applicant's <u>current</u> skills and preferences: | | | | | | | |
| The applicant has a desire to continue educational, employment, and campus life experiences through postsecondary education. | | | | | | | |
| □ Agree | | | | | | | |
| ☐ Disagree | | | | | | | |
| Comments: | | | | | | | |
| | | | | | | | |
| 2. The applicant has a desire to learn and participate in inclusive classroom and work settings. \Box | | | | | | | |
| Agree Disagree | | | | | | | |
| Comments: | | | | | | | |

| | community at some point in the future. |
|--------------|--|
| | ☐ Agree |
| | ☐ Disagree |
| $C \cap$ | mments: |
| CO | mmenes. |
| | |
| 4. | The applicant has a desire to have a competitive job in the community. \Box |
| | Agree |
| | □ Disagree |
| Со | mments: |
| | |
| | |
| | |
| 5. | The applicant has sufficient emotional and independent living skills necessary to participate in |
| 5. | coursework and campus life. |
| 5. | |
| 5. | coursework and campus life. |
| | coursework and campus life. |
| | coursework and campus life. Agree Disagree |
| | coursework and campus life. Agree Disagree |
| Co | coursework and campus life. Agree Disagree |
| Co | coursework and campus life. Agree Disagree mments: The applicant is able to follow a schedule and navigate the school campus with minimal |
| Co | coursework and campus life. Agree Disagree mments: The applicant is able to follow a schedule and navigate the school campus with minimal support. |
| Co 6. | coursework and campus life. Agree Disagree The applicant is able to follow a schedule and navigate the school campus with minimal support. Agree Disagree |
| Co 6. | coursework and campus life. Agree Disagree mments: The applicant is able to follow a schedule and navigate the school campus with minimal support. Agree |
| Co 6. | coursework and campus life. Agree Disagree The applicant is able to follow a schedule and navigate the school campus with minimal support. Agree Disagree |

| 8. | Oo you feel the applicant would benefit from a post-secondary educational experience? why not? | Why or |
|-----|---|--------|
| 9. | What strengths do you feel the applicant has that will benefit them if accepted into Opportunity Orange Scholars? | |
| 10. | What are some challenges you feel the applicant may experience if accepted into the program? | |
| | | |

| Please rate the statements below with the level of assistance the applicant requires for each task: | | | | | | |
|---|------------------------------|---------------------------------|-----------------------------|--------------------------------|------------------------|---------|
| | Requires complete assistance | Needs moderate assistance | Needs some assistance | Needs minimal assistance | Completely independent | Unknown |
| 11. Learning new tasks | | | | | | |
| 12. Coping with stress | | | | | | |
| 13. Asking for help, clarification, or questions | | | | | | |
| 14. Adjusting to new/ unfamiliar situations | | | | | | |
| 15. Following a daily schedule | | | | | | |
| 16. Meeting due dates/ deadlines | | | | | | |

| 17. Engaging in appropriate social interactions | | | | | |
|--|---------------|----------------|----------------|---------------|------|
| 18. Regulating distress, particularly frustrations or disagreements with others | | | | | |
| 19. Meeting/engaging with new people | | | | | |
| 20. Using technology, including a cell phone and computer | | | | | |
| 21. Following written and verbal instructions | | | | | |
| 22. Decision-making | | | | | |
| 23. Problem solving | | | | | |
| 24. Describe one personal a25. What strategies or intervisituations or times when | ventions does | s the applicar | nt use to succ | cessfully man | |
| 26. Students of OOS are requengage in student life. What do you fee | | · | | | |
| What do you fee | | | | | |

| _ | ic response) | | | | | | |
|---|--------------|--|--|--|--|--|--|

application by submitting this recommendation form.

Your support is appreciated!