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# SDSU/Brookings PROJECT SEARCH

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## Student Application Packet



Applicant Name: \_\_\_\_\_

School of Residence: \_\_\_\_\_

Date Received by Project SEARCH: \_\_\_\_\_

**2021-2022 Student Applications Must be Received by  
FRIDAY, FEBRUARY 19, 2021 AT 5:00 PM**

## I. Application Purpose & Guidelines

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This application will help identify and outline the Project SEARCH student's skills and abilities. This provides the information necessary for the Selection Committee to assess the candidate's skills, abilities, and background. The Selection Committee may establish contact with the student, parents or legal guardians, past, present, or current employer, in addition to previous school faculty, e.g., principals, teachers, and counselors, to collect, confirm or validate additional information. Information will be used to identify and satisfy eligibility criteria for program acceptance. The goal is to identify students who will benefit from the Project SEARCH program, and to achieve competitive employment.

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

1. Applicants must tour the SDSU/Brookings site (before their interview and before the SDSU students leave) to observe the culture, possible rotations, meet the coordinator and skills trainer(s), complete an oral interview and job simulation before being considered for acceptance into the Project SEARCH Program. Selection Committee consists of Project Coordinator, Job Coach(es), VR Counselor, Career Advantage Coordinator and at their discretion, Special Services Director and VR District Supervisor.
2. An IEP or addendum will be developed with the IEP team for the upcoming school year.
3. Upon completion of the selection process applicants will be notified of acceptance/non-acceptance by letter and phone.
4. Send the completed application to:

**Project SEARCH**

**2130 8<sup>th</sup> Street South**

**Brookings, SD 57006**

### **Project SEARCH selection criteria**

1. Student must be at least 18 years of age and have completed all requirements for graduation.
2. Student agrees that this will be the last year of services, and will accept the diploma at the end of the Project SEARCH school year.
3. Application for DRS-SBVI services must be completed by June 1 of application year and student must be determined eligible. The student must be determined eligible for Vocational Rehabilitation Services and approved for Project Search.
4. Student must have independent personal hygiene and grooming skills.
5. Student must have independent daily living skills (toileting, transferring, continence, eating, dressing).
6. Student must maintain appropriate behavior and social skills in the program and the workplace.
7. Student must take direction to change behavior.
8. Student must be able to communicate effectively.
9. Student must have the desire to explore transportation options, including public transportation when available, and be trained to travel independently.
10. Student must have previous successful experience in a work environment. (paid or unpaid)
11. Student must have the ability to pass a drug screen and felony check.
12. Student must have immunizations up to date.
13. Student must have the desire to work competitively at the conclusion of the Project SEARCH program.
14. Late applications may be considered by the selection committee unless we are at capacity to best serve students who have already been accepted for the upcoming year. Late applicants must tour the SDSU/Brookings site before the SDSU students leave and apply for DRS-SBVI services on or before June 1 of application year.
15. Out of state applications may be considered by the selection committee unless we are at capacity to best serve students from SD. The home school district, home state VR, or an alternate source will have to fund job coaching.

## II. Project SEARCH Application Packet Checklist

The following items **are required**, and **must** accompany the applicant's submission.

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- The Completed Application
- The Current Individual Education Plan (IEP), with Transition Goals
- The Current Multidisciplinary Team Report and Determination of Special Education Services
- The Applicant's high school transcript *or* the records from the most recent high school
- The most recent or last report card received

### **Upon acceptance, you may be asked to provide the following:**

1. Proof of Health Insurance (Social Security determination if applicable)
2. Copy of State ID or driver's license (if applicant has a driver's license)
3. Current Immunization Records or Copy
4. Be advised that some locations may require a current drug screen and/or background check

# Student Application

## A. Student Information

Date of Birth: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Male  Female

Student Name: \_\_\_\_\_

Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Street Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

## B. Parent/Guardian Information

Parent/Guardian: (living in applicant's household) \_\_\_\_\_ Cell phone: \_\_\_\_\_

Relationship to student (i.e., Father, Mother, Grandparent etc.) \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Primary E-Mail Address: \_\_\_\_\_

Work Place: \_\_\_\_\_ Work Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Relationship to student (i.e., Father, Mother, Grandparent etc.) \_\_\_\_\_

Address: (if different from above) \_\_\_\_\_  
Street City State Zip Code

Work Place: \_\_\_\_\_ Work Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Is the applicant his/her own legal guardian? *If guardianship has been established by a parent(s) or another party at age 18, please answer **no** to this question.* Yes  No

If **no**, please provide the Legal Guardian's name: \_\_\_\_\_

## RELEASE OF RECORDS:

*The records for the student identified above may be transferred to Project SEARCH, their representatives, to members of the Selection Committee, and all program affiliates from his/her School of Residence to establish eligibility, and potential acceptance, pending review.*

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

Date: \_\_\_\_\_

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

Date: \_\_\_\_\_

**C. School Use Only** (Please have Principal, School Counselor, or Case Manager complete)

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

Days absent by grade: 11th \_\_\_\_\_ 12th \_\_\_\_\_

Times Tardy: 11th \_\_\_\_\_ 12th \_\_\_\_\_

Comments about attendance:

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**Arrangements must have been made to defer the High School diploma. Has this been completed?**

Yes  No

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

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School Official Name: \_\_\_\_\_

Date: \_\_\_\_\_

School Official Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**D. Employment Information and Work History**

1. Employer: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Wage: Starting: \_\_\_\_\_ Ending: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ - \_\_\_\_\_ Wage: Unpaid \_\_\_\_\_  
Job Duties: \_\_\_\_\_

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2. Employer: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Wage: Starting: \_\_\_\_\_ Ending: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ - \_\_\_\_\_ Wage: Unpaid \_\_\_\_\_  
Job Duties: \_\_\_\_\_

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3. Have you ever been fired or let go from a job? Yes  No

If Yes, please explain: \_\_\_\_\_

4. Where do you want to work and why? \_\_\_\_\_

## **F. Medications**

### **Prescription Medication(s)**

1. Name: \_\_\_\_\_ Time taken and Dosage amount: \_\_\_\_\_  
Side Effects (such as drowsiness): \_\_\_\_\_ Prescribed For: \_\_\_\_\_  
How long have you been taking this medication? \_\_\_\_\_
  
2. Name: \_\_\_\_\_ Time taken and Dosage amount: \_\_\_\_\_  
Side Effects (such as drowsiness): \_\_\_\_\_ Prescribed For: \_\_\_\_\_  
How long have you been taking this medication? \_\_\_\_\_
  
3. Name: \_\_\_\_\_ Time taken and Dosage amount: \_\_\_\_\_  
Side Effects (such as drowsiness): \_\_\_\_\_ Prescribed For: \_\_\_\_\_  
How long have you been taking this medication? \_\_\_\_\_
  
4. Name: \_\_\_\_\_ Time taken and Dosage amount: \_\_\_\_\_  
Side Effects (such as drowsiness): \_\_\_\_\_ Prescribed For: \_\_\_\_\_  
How long have you been taking this medication? \_\_\_\_\_

Over the Counter medications currently taking: \_\_\_\_\_  
\_\_\_\_\_

Please describe any health or medical issues that may impact a successful job placement:  
\_\_\_\_\_  
\_\_\_\_\_

Please describe any limitations that may impact an internship rotation or employment:  
\_\_\_\_\_  
\_\_\_\_\_

## **G. Service Agencies and Benefits**

1. Do you have a Vocational Rehabilitation Counselor? (VR/DRS or SVBI) Yes  No   
Counselor's Name: \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

2. Do you receive any of the following?  
SSI: Yes  No  Ticket to Work: Yes  No   
SSDI: Yes  No

## **H. Behavioral Summary**

1. Do you have any behaviors or interactions with peers or adults that might impact a successful job placement?

Yes  No

Please describe all behaviors and characteristics: \_\_\_\_\_

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2. Have you ever been suspended, expelled, or removed from the school environment for any reason?

Yes  No

If yes, please explain: \_\_\_\_\_

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## **I. Severe Allergies**

1. Do you have any severe allergies such as latex, bees, peanuts, gluten, or shellfish that we should be aware of?

Yes  No

If yes, please explain: \_\_\_\_\_

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## **J. Student Response Question**

Why do you want to participate in Project SEARCH, and what do you hope to achieve?

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## **K. References (not family)**

<b>Name</b>	<b>Relation to you</b>	<b>Phone Number</b>	<b>Email Address</b>
1. _____	_____	(____) _____ - _____	_____
2. _____	_____	(____) _____ - _____	_____
3. _____	_____	(____) _____ - _____	_____

## **Non Discrimination Policy**

The **Brookings School District** does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities, and provides equal access to the Boy Scouts and other designated youth groups. The following person has been designated to handle inquiries regarding the non-discrimination policies:

504 Coordinator  
2130 8<sup>th</sup> Street South  
Brookings, SD 57006  
605-696-4705

Title IX Coordinator  
2130 8<sup>th</sup> Street South  
Brookings, SD 57006  
605-696-4705

South Dakota Regional US Office for  
Civil Rights:  
999 18<sup>th</sup> Street Suite 417  
Denver, CO 80202  
Fax: 303-844-2025  
TDD: 800-368-1019  
Email: [OCR.KansasCity@ed.gov](mailto:OCR.KansasCity@ed.gov)

If you are accepted into the Project SEARCH program you must abide by the following terms and conditions, and you will be required to sign a Student Participation Contract:

- I understand that I am deferring my high school diploma for one year while I participate in Project SEARCH, and I will accept my diploma upon completion of the program.
- I understand that Project SEARCH is a Brookings School District program, and I will adhere to District policies and procedures, unless otherwise specified.
- I understand that SDSU/Brookings Project SEARCH follows the national Project SEARCH curriculum.
- I will complete at least three unpaid job rotations within the host business.
- I will attend the program every day as scheduled.
- I understand that the Project SEARCH program follows the Brookings School District calendar.
- I will dress appropriately and wear required attire.
- I will call the Project SEARCH Coordinator when I am absent or tardy.
- I will learn to use public transportation when available.
- I will follow all the rules established by the program and host business.
- I will attend and actively participate in all meetings with my rehabilitation counselor, parents, teachers, and program affiliates.
- I will obtain a state issued identification card and provide a copy on or before the first day of the program.
- I understand that if and when I secure competitive employment, I will need to provide to my future employer my social security card and birth certificate.
- I understand that I may need to provide banking information or open a bank account for the direct deposit of my monthly VR stipend and/or earnings from future employers.
- I will actively pursue competitive employment when I have completed the program.

**This application has been completed by:**

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Name	Title	Phone Number	Date
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Signature