



POWER PATHWAYS PROGRAM APPLICATION PACKET

APPLICATION CHECKLIST

Please submit the following items:

- A Completed Application Packet
- Two (2) Adaptive Behavior Skills Checklists (completed by professionals in sealed envelopes or sent via email or fax to a program coordinator – see contact information below)
- Official High School Transcript (if available in a sealed envelope)
- Copy of Psychological Evaluation (most current) and IEP or 504 Plan (if available in a sealed envelope)
- Signed DisAbility Access Services information release and FERPA forms

Please send your application via mail or email to the attention of the Access to Achieve Advisor, *Tammy Maddox*, email address trmaddox@gtcc.edu

The college's mailing address is Guilford Technical Community College, P.O. Box 309, Jamestown, NC 27282.

If the applicant is selected for an interview, our staff will contact him/her to schedule an interview and testing appointment.

The total program cost **is due upon acceptance** in order to register and attend orientation and the first day of class. Food Service students will also be expected to purchase two (2) aprons and a textbook during orientation. Scholarships are available for those who qualify and can demonstrate financial need. **Caregivers/guardians are expected to attend orientation with accepted students.**

Questions? Please contact Tammy Maddox at 336-334-4822 x53010. Thank you for your interest in POWER Pathways!

PROGRAM MISSION

POWER (Providing Opportunities for Workforce Education Review) Pathways is an integrated program designed to provide employment skills training to adult students with intellectual and developmental disabilities. Pathways courses are focused on helping students gain the necessary skills in order to find meaningful career or volunteer opportunities upon course graduation. Additionally, included in the coursework is communication and quantitative reasoning to enhance personal development and serve as a conduit for technical skills. The goal of our program is to bridge the gap and create opportunities for employers to hire and build unique positions for adults with IDD that will give them opportunities to succeed in a chosen career field. POWER Pathways courses are offered on the GTCC Greensboro campus and are currently two semesters in length. These courses are fee based and scholarships are available to individuals who demonstrate a financial need or hardship.

REQUIREMENTS FOR POWER PATHWAYS

There is an application and several qualification requirements in order to be accepted into the Pathways Courses.

1. AGE REQUIREMENT

Students who are applying to our program must be at least 18 years or older.

2. BASIC EDUCATION PROFICIENCY

Prospective students are most likely to benefit from this program if they score at approximately a third-grade reading and math level on a CASAS or TABE assessment. ***Students who do not have a current TABE or CASAS score must schedule a testing appointment at GTCC to complete this assessment. This may be done in conjunction with the POWER Pathways admissions interview.**

3. ADAPTIVE BEHAVIOR SKILLS CHECKLIST

Students must submit **two (2)** Adaptive Behavior Skills Checklists completed by someone who has worked with them in a professional capacity which indicate the student's ability to successfully participate in the POWER Pathways program. These can be submitted in sealed envelopes along with the program application, or submitted via email or fax to the appropriate program coordinator (see p.1).

4. INTERVIEW

Students must complete a situational interview with a GTCC staff member and be able to demonstrate appropriate social, behavioral, and practical skills.

FOOD SERVICE PATHWAY PROGRAM REQUIREMENTS

The program requires the ability to stand, walk and perform repetitive motions for extended periods of time and the ability to lift approximately 50lbs with minimal accommodations. Students must be able to meet these physical, emotional and intellectual requirements in order to complete the course work and obtain employment in the field.

Key Considerations:

Academics:

- Can the applicant read, interpret and follow a basic recipe, charts or picture guidelines?
- Is the applicant able to identify or use basic units of measurement for baking or cooking, e.g. cups, spoons etc.?
- Is the applicant able to read and comprehend a minimum of 3rd grade level language and text?
- Has the applicant demonstrated the ability to master multi-step tasks and execute them with minimal support?
- Has the applicant demonstrated adequate auditory processing skills to take in information and respond quickly?

Social Skills:

- Does the applicant have the ability to accept a series of directives and follow with minimum assistance?
- Can the applicant remain composed and focused during stressful periods or activities?
- Can the applicant interact with others in a positive manner?
- Can the applicant demonstrate the ability to maintain good personal hygiene?
- Does the applicant have the ability to tolerate or work in a busy/fast paced environment? What is his/her tolerance for noise?
- Can the applicant exercise patience with simple, redundant tasks?
- Can the applicant work cooperatively and in pairs to complete a cooking project?

Physical:

- Does the applicant have average fine motor skills and motor/balance?
- Is the applicant able to lift and handle hot/cold containers with food, sort food items, squat, lift and bend frequently etc.?
- Can the applicant stand for extended periods of time?
- Can the applicant tolerate heat/cold in a kitchen environment?
- Is the applicant able to manage and work with sharp kitchen tools (e.g. Chef knives, box graters)?

CUSTOMER SERVICE PATHWAY PROGRAM REQUIREMENTS

The program requires the ability to interact with classmates and the general public as well as operate a computer or other technological devices. Students must be able to meet these physical, emotional and intellectual requirements in order to complete the course work and obtain employment in the field.

Key Considerations:

Academics:

- Can the applicant read, interpret and follow simple multiple step directions?
- Is the applicant able to read and comprehend a minimum of 3rd grade level language and text?
- Has the applicant demonstrated the ability to master multi-step tasks and execute them with minimal support?
- Has the applicant demonstrated adequate auditory processing skills to take in information and respond quickly?

Social Skills:

- Does the applicant have the ability to accept a series of directives and follow with minimum assistance?
- Can the applicant remain composed and focused during stressful periods or activities?
- Can the applicant interact with others in a positive manner?
- Can the applicant demonstrate the ability to maintain good personal hygiene?
- Does the applicant have the ability to tolerate or work in a busy/fast paced environment? What is his/her tolerance for noise?
- Can the applicant exercise patience with simple, redundant tasks?
- Can the applicant work cooperatively and in pairs to complete a project?



PATHWAY PREFERENCE

Please check one pathway location listed below:

- I am applying for the Food Service Pathway
- I am applying for the Customer Service Pathway

STUDENT INFORMATION

NAME _____

ADDRESS: _____

CITY _____ STATE _____ ZIPCODE _____

TELEPHONE 1: (____) _____

TELEPHONE 2: (____) _____

EMAIL ADDRESS: _____

WILL YOU BE AT LEAST 18 YEARS OLD BY THE PROGRAM STARTING DATE?

Yes No

ARE YOU YOUR OWN LEGAL GUARDIAN?

Yes No

If NO, please list the name of your legal guardian. _____

Guardian's phone number _____ email address _____

DO YOU HAVE TRANSPORTATION TO OUR CAMPUS?

- I will ride the bus. Someone else will drive me.
- I will drive myself. Other _____

Please Read all the answers and then only **check** the most correct answers.

HAVE YOU COMPLETED HIGH SCHOOL? YES NO

Yes, I received my diploma in (month & year) _____



Yes, I received my "Graduation Certificate" (formerly Certificate of Achievement) in (month & year) _____.

No. My highest grade completed was grade _____ in (month & year) _____

WHAT WAS THE LAST SCHOOL YOU ATTENDED?

School Name: _____

City: _____ State: _____

STUDENT RECORDS

TRANSCRIPTS: Students are responsible for contacting their previous high school and requesting a sealed, official copy of their high school transcript.

DISABILITY SERVICES: Students who require disability services or reasonable accommodations must identify themselves as having a disability and provide current diagnostic documentation to the Disability Services Office. For more information please contact the Guilford Technical Community College Disabilities Services at 336-334-4822, ext. 53109 or email das@gtcc.edu.

SCHOOL/AGENCY REFERRAL

Two POWER Adaptive Behavior Skills Checklists must be completed and submitted along with this application. The individuals completing these forms must be someone familiar with the student's skills or work habits and must have worked with the student in a professional capacity, for example as a teacher, job coach, counselor, social worker, employer or supervisor (no friends or family members, please).

COMMUNITY SUPPORTS OR SERVICES

Listed below is a list of community supports or services. Please check the ones that you are connected with at this time:

- Division of Vocational Rehabilitation (VR)
- Managed Care Organizations (Cardinal Innovations, Sandhills, Alliance)
- Mental Health (Autism Society, Trinity Behavioral Health, Monarch, RHA etc.)
- Social Security Disability Insurance Supplemental Security Income
- Other: _____



GUILFORD TECHNICAL
COMMUNITY COLLEGE

STUDENT’S EMPLOYMENT STATUS:

- Unemployed, not seeking a job Unemployed, seeking a Job
- Employed ____Hours per week

CURRENT EMPLOYMENT INFORMATION

[Leave this section blank if currently unemployed]

EMPLOYER: _____

Please check one that apply to you:

- VOLUNTEER WORK PAID EMPLOYMENT

DIRECT SUPERVISOR: _____

WORK PHONE: (____) _____

WORK DAYS / HOURS: _____

RATE OF PAY: _____ NUMBER OF HOURS: _____

APPLICANT’S SIGNATURE

[Please read and sign below]

By completing and submitting this application, I agree to the policies and procedures of Guilford Technical Community College. I understand my failure to provide complete, accurate and truthful information on this application may be grounds for refusal of admission.

Student’s Signature:

_____ Date: _____



Student Name _____

Name of Person Completing Form _____

Title of Person Completing Form (ex: GCS staff, GTCC staff, social worker, VR counselor)

How long have you known the applicant? _____

What is or was your relationship with this applicant? _____

Your phone number _____ Email _____

POWER Adaptive Behavior Skills Checklist

Adaptive behavior is a developmentally determined set of coping skills. Deficits in adaptive behavior are defined as non-existent in an individual's effectiveness in meeting the standards of maturation, learning, personal independence, social responsibility and school performance.

*Directions: Please rate the items on this checklist according to how the student performs, and **place this form in a sealed envelope before returning to the student.** Alternatively, you may mail or email this form to Tammy Maddox, Access to Achieve Advisor, tmaddox@gtcc.edu*

The college's mailing address is Guilford Technical Community College, P. O. Box 309, Jamestown, NC 27282.

Communication Skills

Verbal, written, and listening skills needed for communication with other people, including vocabulary, responding to questions, conversation skills, academic skills, etc.

	No opportunity to observe (N/A)	Non-existent (0)	Proficient (1)	Comments
Behavior				
Demonstrates the ability to communicate via appropriate speech (coherent, sensible, mature)				
Demonstrates the ability to communicate via text/print				
Participates in class discussions and assignments				
Retains and uses information				
Communicate s needs appropriately				
Communicate s appropriate feelings				
Can make decisions and choices				
Able to follow multi-step directions				

Socialization Skills

Skills needed to interact socially and get along with other people, including having friends, showing and recognizing emotions, assisting others, and using manners.

	No opportunity to observe (N/A)	Non- existent (0)	Proficient (1)	Comments
Behavior				
Responds or reacts appropriately to a given situation				
Follows school rules and code of conduct and understands reasons for those rules				
Demonstrates appropriate verbal restraint (ex: talks in turn, regulates volume appropriately)				
Respects the rights and property of others				
Controls anger/feelings				
Is flexible (ex: follows a situation's demands or adjusts to new routines)				
Accepts authority (obeys, responds appropriately)				
Responds appropriately to different age groups.				
Attends school/community functions independently.				

Daily Living Skills

Skills needed for personal care, independence, responsibility, and self-control.

	No opportunity to observe (N/A)	Non- existent (0)	Proficient (1)	Comments
Behavior				
Takes care of personal needs (ex: toileting and washing hands)				
Aware of basic hygiene				
Demonstrates appropriate eating behaviors				
Walks independently				
Able to navigate building independently				

Signature of individual completing this form _____ Date _____

GTCC staff member receiving form _____ Date _____

Consent to Release Student Information

Per Compliance with "The Family Educational Rights and Privacy Act of 1974" (FERPA)

I, _____, hereby permit Guilford Technical Community College to release the following information from my educational records (check all that apply):

- | | | |
|----------------------------------------------------------|------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Academic Standing | <input type="checkbox"/> Payment Information/History | <input type="checkbox"/> All Records |
| <input type="checkbox"/> Class Schedule for Current Term | <input type="checkbox"/> Registration History | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Cumulative Credit Hours | <input type="checkbox"/> Transcript/Grades | _____ |
| <input type="checkbox"/> Financial Aid Information | <input type="checkbox"/> Veterans' Information | |

FERPA requires that you state the purpose of the disclosure(s): _____.

The above information may be released in person or in writing to the following individual(s)/parties, **once s/he has confirmed my social security number, date of birth, and/or other specific identifying information that may be requested.** (Additional names: attach additional pages)

 Printed Name

 Printed Name

I understand that the above information is considered private information under the Federal FERPA guidelines. By completing and signing this form, I realize that this information will be released **only** to the party(ies) indicated. Information cannot be requested or be released via the internet. This release does not cover Counseling Services records. I understand that I have the right not to consent to the release of my educational records; that I have the right to receive a copy of such records upon request. **This release does NOT authorize others to drop classes on my behalf.**

This form must be submitted in person, by mail, or by FAX, with picture identification to Enrollment Services, located in the Medlin Campus Center, 2nd level, Jamestown Campus. *This agreement will remain in effect until revoked in writing by me, the student.

 Student Name (printed) / _____
 Birth mo./day/yr.

 Student GTCC Identification Number

 Student Signature

 Date

 Student E-mail Address

 Student Phone Number

***I request for this agreement to be cancelled.** _____
Student Signature Date

Office use only: Copy of student's state ID (such as Driver's License) must be attached to this form.
 Notes placed in ASUM/Comments: (Entry **required in this format: crf mo/day/yr your initials. To whom; list items checked for release.**)

by _____ (Staff signature required) _____ Date

I, _____, authorize representatives from disAbility Access Services at Guilford Technical Community College to release and/or obtain information relevant to the impact of my disability with other professionals (on and off campus). I understand that this information is necessary to establish eligibility and will be used to plan and implement appropriate accommodations that will provide equal access to Guilford Technical Community College facilities and programs.

- I have been informed that signing this form is voluntary.
- I understand that this authorization will remain in effect during my **enrollment at** Guilford Technical Community College or until revoked in writing by me.
- I understand that I have access to my educational information (i.e., Grades, Transcript, Financial, etc.) via my Titan Cruiser/Web Advisor account. Therefore, it is my choice to share this information with whom ever I choose. DAS staff will not share this information with any individual, other than you (the student), for any reason.
- Disclosure of student information pertaining to disability and/or accommodations and services may be made under the following circumstances:
 - The individual making the request has a "legitimate educational interest".
 - You (the student) has requested that we (DAS) have permission to share information with a specific person/agency/professional. (see list below)

Student's Signature

Date

Disability Services Office Counselor's Signature

Date