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Purpose

The purpose of this application packet is to outline the skill set of the Project SEARCH Intern Candidate. This application enables the Selection Committee to properly assess each Intern Candidate's skills, abilities and background. A parent, Intern Candidate, counselor, school staff, or employer may be contacted by the Selection Committee to gather additional information. Our final goal is to select Intern Candidates who will be successful in a Project SEARCH program and reach the outcome of competitive employment.

Selection Process Guidelines

1. Submit the completed application by Friday, February 15th to:

Craig Blasko
Supervisor of Ancillary Services, Berrien RESA

2. The Selection Committee will only accept fully completed applications. Any incomplete application will be disregarded and the Intern Candidate will not be accepted.
3. If accepted, the Selection Committee will match the Intern Candidate skill set and interests with the appropriate Project SEARCH Internship.
4. If accepted, an IEP will be developed with the IEP team for the 2019-2020 school year.
5. If accepted, Intern Candidate must be able to pass a criminal background check and drug screen.

***Please note:**

- The Selection Committee will include Instructor, Job Coach, Representative from Lakeland Health, Michigan Rehabilitation Services Vocational Counselor, and Representatives from Riverwood and Michigan's Bureau Services for Blind People.
- This application packet is utilized for post-secondary school transition candidates.

Order of Selection

1. Oldest Intern Candidates (18 – 26 age range)
2. Intern Candidates who have finished their necessary years of high school
3. Intern Candidates who will benefit from participation in a variety of internships
4. Intern Candidates who are interested in using public or own mode of transportation to access Project SEARCH
5. Intern Candidates who desire to work competitively at the end of Project SEARCH

Required Documents

All of the documents listed below must be completed and submitted together for consideration.

- Completed Application Packet
- Shot/Immunization Record or Copy
- Current Individual Education Program (IEP) including Transition Goals
- Current Evaluation Team Report
*Include Most Recent Math and Reading Scores/Grade Levels
- High School Transcript
- School Transcript from any other formal training
- Attendance Record
- Work Based Learning Experience Evaluation

Return completed Packet to:

**Craig Blasko
Supervisor of Ancillary Services, Berrien RESA
P.O. Box 364
711 St. Joseph Ave
Berrien Springs, MI 49103
craig.blasko@berrienresa.org**

***Please note:**

A completed background and criminal check will need to be completed by June 1 for accepted students.

List of Lakeland Requirements

Immunizations: Documentation of vaccination, disease, or titer:

- Current TB test-not older than 1 year
- Measles
- Mumps
- Rubella
- Chicken Pox
- Hepatitis B
- ***Influenza – required for placement that will occur during flu season; October 1 – April 30***

Other:

- 5 panel drug screen
- National criminal background check

To be completed upon acceptance into program of study requiring clinical time at facility.

Results not older than 6 months from clinical start date.

Key Dates & Deadlines

- 🌸 Applications due Friday, February 15, 2019
- 🌸 Intern Candidate Skills Assessment/Interview Monday, April 16, 2019 at Spectrum Lakeland Health, St. Joseph: GMA Room
- 🌸 Intern Selection Committee meets prior to April 26, 2019
- 🌸 Letters out to Intern Candidates/families & schools by Friday, April 26, 2019
- 🌸 New Intern Orientation is Monday, May 20, 2019
- 🌸 Michigan Rehabilitation Services/Bureau Services for Blind Person will open eligible cases in March – May 2019
- 🌸 Community Mental Health will open eligible cases in August-March 2019/20
- 🌸 Comprehensive Independent Living Evaluation in May – July 2019
- 🌸 Student IEP meetings with affiliated school and team members at Spectrum Lakeland in August 2019

Craig Blasko

Supervisor of Ancillary Services, Berrien RESA

P.O. Box 364

711 St. Joseph Ave

Berrien Springs, MI 49103

craig.blasko@berrienresa.org

Project SEARCH Application for Berrien County at Spectrum Lakeland Health, St. Joseph

Please complete and return to your contact teacher.

PERSONAL DATA

Name: Last First Middle

Address: Street City Zip

Home Phone: Cell Phone: Email:

District of Residence: School Currently Attending:

Date of Birth: Choose one (optional) Male Female

Student is their own legal guardian Yes No

Parent/Guardian Name: Parent/Guardian email:

Address: Street City Zip

Parent/Guardian Home Phone: Parent/Guardian Cell Phone:

PARENT/INTERN CANDIDATE INFORMATION:

1. Release: The student's educational/employment records concerning my son/daughter will be transferred from the home school to Berrien RESA.
2. Equal Opportunity: Project SEARCH placement will be made without regard to race, color, age, sex, national origin, cultural or economic background, housing circumstances is entitled to equal opportunity for educational development.

A two-week trial period will be required of all accepted enrollees. The parent/guardian and student agree to comply with this procedure.

Intern Signature X Date

Parent/Guardian Signature X Date

SCHOOL USE ONLY

Please attach transcript and most recent report card/IEP.

Total Credits to Date

Cumulative GPA

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

Days Absent: 2017-2018

2018-2019

Comments about attendance:

COUNSELOR/SPECIAL EDUCATION STAFF COMMENTS:

Counselor/Special Education Staff Signature X

Title

Date

FUTURE EMPLOYMENT PREFERENCES and BACKGROUND

What is your career of interest?

How do you want to be employed in the community upon the completion of Project SEARCH?

Full-time Part-time

Which shift would you prefer working after the completion of Project SEARCH?

1st Shift (7am – 3pm) 2nd Shift (3pm – 11 pm) 3rd Shift (11 pm – 7 am)

Would you be willing to work holidays and/or weekends?

Yes No

Do you plan to work during the school year, in addition to being in the Project SEARCH Program?

Yes No

If yes, where?

How many days/hours?

List jobs you do or have done in the school or in the community:

Employer #1:

Contact Number:

Supervisor's Name:

Paid

Unpaid

Job Duties:

1.

2.

3.

4.

Employer #2:

Contact Number:

Supervisor's Name:

Paid

Unpaid

Job Duties:

1.

2.

3.

4.

Employer #3:

Contact Number:

Supervisor's Name:

Paid

Unpaid

Job Duties:

1.

2.

3.

4.

Have you ever been fired from a job?

Yes

No

If yes, please explain:

Have you ever quit a job?

Yes

No

If yes, please explain:

SERVICE AGENCIES

Do you have a Vocational Rehabilitation Counselor? (Michigan Rehabilitation Services or Michigan Bureau of Services for Blind People)

- Yes Name Phone Number
- No

Are you eligible for services from Community Mental Health and/or Substance Abuse Services?

- Yes Supports Coordinator Phone Number
- No

INDEPENDENT LIVING/BEHAVIORAL SUMMARY CHECKLIST

List medications, dosage, and time of day each medication is taken by the student.

Medication 1	<input type="text"/>	Dosage	<input type="text"/>	Time of Day	<input type="text"/>
Medication 2	<input type="text"/>	Dosage	<input type="text"/>	Time of Day	<input type="text"/>
Medication 3	<input type="text"/>	Dosage	<input type="text"/>	Time of Day	<input type="text"/>

Check all deficits or behavioral issues that may apply in which you would need support.

School staff may assist you in completing this section of the application.

- | | |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Mobility | <input type="checkbox"/> Substance abuse |
| <input type="checkbox"/> Functional reading at workplace | <input type="checkbox"/> Mood |
| <input type="checkbox"/> Reading comprehension | <input type="checkbox"/> Attention |
| <input type="checkbox"/> Speech/language | <input type="checkbox"/> Hyperactivity |
| <input type="checkbox"/> Handling money/transactions | <input type="checkbox"/> Violent behavior |
| <input type="checkbox"/> Communicating/working with others | <input type="checkbox"/> Harming self or others |
| <input type="checkbox"/> Interpreting/responding appropriately to others | <input type="checkbox"/> Withdrawal/isolation |
| <input type="checkbox"/> Understanding acceptable level of personal interaction | <input type="checkbox"/> Bullying |
| <input type="checkbox"/> Attendance | <input type="checkbox"/> Decision Making |
| <input type="checkbox"/> Self-care/hygiene | <input type="checkbox"/> Adjusting to new situations |
| <input type="checkbox"/> Medicinal self-administration | <input type="checkbox"/> Theft |
| <input type="checkbox"/> Self-direction | <input type="checkbox"/> Recall instruction on work task |
| <input type="checkbox"/> Confused/disoriented | <input type="checkbox"/> Work tolerance (standing, stairs, lifting) |
| <input type="checkbox"/> Distractible | <input type="checkbox"/> Personal needs on the job |

STUDENT RESPONSE QUESTION

Why do you want to participate in Project SEARCH? (Complete in your own words and/or person assisting will write the responses in the student's own words)

REFERENCES

List three references.

Family Reference

Name Relationship to Student
Phone Number Email Address

School Reference

Name Title
Phone Number Email Address

Community Agency/Other Reference

Name Title
Phone Number Email Address

ASSISTANCE

The person assisting the student to complete this application is:

Name Title
Organization
Phone Number Email Address
Signature X Date

PROJECT SEARCH INTERN CONTRACT

****The student will be asked to sign this upon acceptance into the program at the IEP meeting.***

Read the student contract below and sign and date.

I, , understand that if I am accepted into the Project SEARCH program and must abide by the following terms and conditions:

- I will complete at least three unpaid job rotations within the host business.
- I will attend the program every day from **8:30 am- 3:00 pm** (*subject to change*), Monday through Friday.
- I understand that the Project SEARCH program correlates with **Berrien RESA's** school calendar.
- I will dress appropriately and wear required attire.
- I will call my instructor and departmental supervisors when I am absent or tardy.
- I will make up any assignments missed due to excused absences.
- I understand that I am responsible for transportation to the host site.
- I will learn to use public transportation when available.
- I will follow all the rules established by the program and host business (Lakeland Health).
- I will attend monthly meetings with my rehabilitation counselor, parents, teachers, and business staff.
- I will be an active participant and communicate any issues at our monthly meetings.
- I will actively pursue employment.
- I understand that while completing my internship at Lakeland, it is expected that I will receive an influenza vaccination.
- If I am offered a job by Lakeland Health following Project SEARCH, I am aware that Lakeland Health is committed to promote health and healthy choices to the community and, therefore, does not hire individuals that use nicotine products

I have read the above terms and conditions and agree to accept my placement in the Project SEARCH program. I understand that I may be asked to leave Project SEARCH if I fail to follow the terms and conditions.

Intern Signature X Date

Parent/Guardian Signature X Date