



Application Packet



Project SEARCH



**Please rate your Project SEARCH site preferences below and submit completed application packet (via mail or drop off) at
2222 S 114th Street, West Allis WI 53227
Attn: Jedd Lapid**

Please List First (1), Second (2), Third (3) choice Preferences of Site

Mark with a (0) if a site is NOT an option

- 
- ☐ Andis Project SEARCH – Sturtevant WI
 - ☐ Children’s Hospital of Wisconsin Project SEARCH
 - ☐ Froedtert & Medical College of Wisconsin Project SEARCH
 - ☐ Froedtert St. Joseph's Hospital Project SEARCH - West Bend
 - ☐ ProHealth Care Waukesha Memorial Hospital Project SEARCH

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Program Overview

Project SEARCH is a unique, business led, nine month transition program that takes place entirely at the workplace.

Total workplace immersion facilitates a seamless combination of instruction, career exploration, and hands-on training through worksite rotations.

Project SEARCH provides real-life work experience to help individuals with significant disabilities make successful transitions into community employment.

Individuals attend the program for 9 months in the host business. The business provides access to an on-site training room that can accommodate up to 12 individuals. The site is staffed by an instructor and job coaches to meet the educational and training needs of the individuals.

- Program group of 10 – 12
- Total workplace immersion
- Internship rotations for career exploration and job skill development
- Customized job search assistance
- Goal of competitive employment

For more information about Project SEARCH, please visit the website at www.projectsearch.us

For more information Project SEARCH and the application process, please contact:

Jedd Lapid

Easterseals SE Wisconsin

Email: jeddl@eastersealswise.com

Cell: (262) 751-9592

Application Guidelines

This application enables the selection committee to properly assess each candidate's skills, abilities, and background. A parent, candidate, counselor, teacher, or employer may be contacted by Project SEARCH to gather additional information. Our goal is to select candidates who will be successful in Project SEARCH and reach the outcome of community employment.

The selection process includes the following guidelines:

1. Submission of application and materials.
2. Individuals will be contacted by Project SEARCH staff to discuss application and any follow up questions.
3. Candidates may be contacted by Host site Human Resources for an interview prior to selection day.
4. Once the application is reviewed by the selection committee (Project SEARCH Staff, representatives from the Project SEARCH sites, Division of Vocational Rehabilitation representatives, long term care and local school districts), the candidate will be asked to participate in a "Selection Day" assessment. All candidates are **required to participate** in "Selection Day" to be eligible for Project SEARCH. "Selection Day" includes different skill stations and an interview.
 - Application deadline varies from site to site. Please contact Julie Schulz for your sites deadline. (typically applications are due in November for December Selection day and January for February Selection day)
 - All candidates that are funded through a school district will be informed of acceptance first. If you are not funded you may be put on a waiting list until all selection days are complete.
5. If accepted, candidates must be able to pass a criminal background check, and drug screen. Some sites may ask for a pre-employment physical and immunizations as well.

Selection Priority

- Candidates within the high school transitioning years (18 – 21 age range) are given top priority in the selection process. (Excluding Froedtert Health sites)
- Candidates who desire to work in the community at the end of the Project SEARCH program.
- Candidates who are eligible for long term support.
- Candidates who will benefit from participation in a variety of internships.
- Candidates who have access to transportation to/from the Project SEARCH program site.

Application Checklist

Step 1—Personal Information

Office Use Only	
Date Received:	_____
Date Reviewed:	_____
Reviewed By:	_____
Status:	_____

Please note: All items on this checklist must be completed and submitted together for consideration.

- ☐ Completed application and assessment with signatures
- ☐ Candidate Photo
- ☐ Letter from Parent, Guardian, or someone who knows the person well describing candidate's strengths and areas for further development
- ☐ Letter of Recommendation from School Representative, Employer, Volunteer Placement Supervisor, or Family Care Case Manager
- ☐ Resume

From Division of Vocational Rehabilitation (DVR):

- ☐
 - Individual Plan for Employment (IPE)
 - Functional Assessment Report (FAR)
 - Letter confirming funding and DVR Counselor's name

From School: (Not needed for Froedtert Health programs)

- ☐
 - Current Individual Education Plan (IEP) including Transition Goals
 - High School Transcript
 - Attendance Record
 - Letter of funding support and Administrator's name OR see below if funding will come from Family Care, IRIS or private pay

From Family Care/IRIS/Private Pay:

- ☐
 - Letter from Family Care, IRIS, or private pay statement confirming funding, contact person, and their information
 - Functional Screen (if enrolled with Family Care or IRIS)
- ☐ Attendance at a Project SEARCH information session or tour

Please mail all site specific materials to:

Project SEARCH Instructor – Site Supervisor
Easterseals SE Wisconsin
2222 S 114th Street,
West Allis WI 53227

Name			
	Last	First	Middle Initial
Address			
	Street	City/State	Zip Code
Home Phone		Cell Phone	
	(XXX)XXX-XXXX	(XXX)XXX-XXXX	
Email Address			
Date of Birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Disability			

Emergency Contact Name			
Check One:	<input type="checkbox"/> Family <input type="checkbox"/> Support Person	Last	First
	<input type="checkbox"/> Legal Guardian <input type="checkbox"/> Court Appointed Guardian		
Address			
	Street	City/State	Zip Code
Home Phone		Cell Phone	Work Phone
	(XXX)XXX-XXXX	(XXX)XXX-XXXX	(XXX)XXX-XXXX
Email Address			

DVR Counselor		
	Name	Phone Number

Family Care or IRIS Consultant			
	Name	Phone Number	
Supports & References	Name	Phone	Relation
	Name	Phone	Relation

Please review the following and check all that apply. Your signature indicates that you acknowledge and agree with these statements.

- ☐ **Release:** The candidate's records for the candidate will be shared with the Project SEARCH selection committee.
- ☐ **Equal Opportunity:** Project SEARCH placement will be made without regard to race, color, national origin, gender, age, religion, or disability.
- ☐ **Trial Period:** A thirty day trial period will be required of all accepted interns. The parent and intern agree to comply with this procedure.
- ☐ **Application Submission:** The information provided on the application is complete and accurate to the best of my knowledge. I understand that submitting this application does not guarantee my acceptance into a Project SEARCH internship.

Signature: _____ Date: _____ Signature: _____ Date: _____

Candidate Guardian (if applicable)

Step 2—Work/Education History

Work History (Please list paid and unpaid/volunteer experiences.)	Employer		Job Title		Paid		Unpaid	
	Supervisor		Phone Number		<input type="checkbox"/>		<input type="checkbox"/>	
	Dates of Employment		Reason for Leaving		Salary	\$	/hr	
	Job Duties:							
	Employer		Job Title		Paid		Unpaid	
	Supervisor		Phone Number		<input type="checkbox"/>		<input type="checkbox"/>	
	Dates of Employment		Reason for Leaving		Salary	\$	/hr	
	Job Duties:							
Employer		Job Title		Paid		Unpaid		
Supervisor		Phone Number		<input type="checkbox"/>		<input type="checkbox"/>		
Dates of Employment		Reason for Leaving		Salary	\$	/hr		
Job Duties:								

Education (Guidance Counselor Use Only)	School Name				Phone Number			
	Guidance Counselor				Graduation Year			
	Total Credits to Date				Cumulative GPA			
	Does the student have the necessary credits for graduation?				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
	Number of credits remaining:		1.		2.			
	Courses that need to be taken:		3.		4.			
	Days Absent	11 th Grade		12 th Grade				
	Comments about attendance:							
	Any medical reasons for absences:							
	Guidance Counselor Signature						Date	

The person assisting the candidate with the application and assessment is:

Name	Title	Organization
Phone Number	Email	
Signature	Date	

Step 3—Self Assessment

	I want to get a job upon completion of Project SEARCH	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	My family supports my goal of community employment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Total hours preferred	<input type="checkbox"/> Full time	<input type="checkbox"/> Part time
	Shift preference	<input type="checkbox"/> 1 st Shift	<input type="checkbox"/> 2 nd Shift <input type="checkbox"/> 3 rd Shift
	Are you willing to work holidays and/or weekends?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Do you plan to work a job while in Project SEARCH?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes, please list the location, and number of days/hours worked each week:		
	Are you considering post-secondary education options?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please describe your plan/goal for future schooling and time frame:			

Independent Living & Self Care	I can prepare a lunch or snack	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I understand what foods are good for me	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I know how to handle money/make change	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I have my own bank account	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I know how to use the bathroom and wash my hands	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I take daily showers/baths without reminders	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I am able to dress appropriately for the weather	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I follow my school or work dress code	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can read a digital clock and tell time	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can read a face clock and tell time	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can make an appointment by phone	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can be at home alone	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I do chores such as making my bed and taking out trash	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I am able to stay awake for a 6-8 hour day	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I have reliable transportation to get to Project SEARCH	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I am willing to learn how to ride the city bus with travel training	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Technology	I can use a computer keyboard with	<input type="checkbox"/> Two fingers	<input type="checkbox"/> Two hands
	I can use Microsoft Word to create letters and documents	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can use Microsoft Excel to create spreadsheets	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can use Microsoft PowerPoint to create flyers and presentations	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I have an appropriate email address and can use email	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can use the computer to play games and listen to music	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can use a cell phone to talk to others	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	I can use a cell phone for text messaging	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Communication & Behavior	I respond when someone speaks to me	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I make eye contact when talking to others	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I use an appropriate tone of voice	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I am comfortable starting a conversation	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I engage in appropriate conversations	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I use appropriate body language	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I display inappropriate touching in public	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I swear/use profanity inappropriately	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I lose my temper with others	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I display aggressive behavior	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I use a cell phone at appropriate times	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I am easily understood by others	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I use adaptive equipment to communicate	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	I use an interpreter and/or sign language	<input type="checkbox"/> Often	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Never
	Please list accommodations that are needed			

Interests	I participate in the following activities during and after school:	<input type="checkbox"/> Band	<input type="checkbox"/> Theatre	<input type="checkbox"/> Church
		<input type="checkbox"/> Choir	<input type="checkbox"/> Scouts	<input type="checkbox"/> Exercise
		<input type="checkbox"/> Sports:		
		<input type="checkbox"/> Other:		

Problem Solving	In your own words, please give examples of how you would solve each problem.
	I missed my bus when I was going someplace. In order to get where I was going I would:
	I was vacuuming and the vacuum cleaner stopped working. In order to finish I would:
	I lost my house key. In order to get in the house I would:
	I was using my computer and it stopped working. In order to get it working I would:
	My parents were not home at dinner time and I was hungry. What would I do?
	Someone teased me or was mean to me. I would react by:

In your own words, please respond to the following question:

Why do you want to come to Project SEARCH?



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every style. every groom. every cut.

 **Children's**
Hospital of Wisconsin
Kids deserve the best.

Froedtert & MEDICAL COLLEGE of WISCONSIN

 **PROHEALTH CARE**

 **easterseals**
Southeast Wisconsin

STATE OF WISCONSIN
 **DWD**
Department of Workforce Development
Vocational Rehabilitation

