

CrossingPoints Admissions Packet For 2020-21 School Year

Teacher Packet

Must be uploaded into the Online portal

by Friday, February 7, 2020







Application for Participation in CrossingPoints Program

A Collaborative Transition Program of the Tuscaloosa City Schools, Tuscaloosa County School System, and the University of Alabama College of Education Department of Special Education and Multiple Abilities

Program Description: CrossingPoints is a post-secondary transition program of the University of Alabama, Tuscaloosa City Schools, and Tuscaloosa County School System [9-Month School Year Calendar]

CrossingPoints Program at The University of Alabama seeks to assist youth with disabilities ages 18-21 years in establishing, maintaining, and improving the quality of transition education services. CrossingPoints is a collaborative program between the University of Alabama's Special Education and Multiple Abilities Department in the College of Education and the Tuscaloosa City and County School Systems. Students participating in CrossingPoints receive hands on instruction in vocational employment aspects of transition during their rotating job placement and specially selected job sites at the University of Alabama and selected off campus job sites. The students spend up to 3 hours a day 4 days a week in real job settings, while receiving skills instruction in daily living, recreation/leisure, health/fitness, and community participation. Furthermore, students develop life-long learning skills in academic areas of reading, math, and the arts.

Eligibility Criteria:

- Applicant has a demonstrated and documented desire for post-school competitive (with time-limited support) employment.
- Applicant maintains functional capacity in small groups no smaller than 4 students and one staff member.
- Applicant must have a demonstrated potential for progressively gaining independence at work site, classroom, and other activities spread across the University of Alabama campus.
- Applicant has demonstrated potential to be able to navigate unassisted around the University campus.
- Applicant must possess some form of systematic communication not limited to verbal speech to express needs, desires, and make choices.
- Applicant has demonstrated potential to be able to express self to new acquaintances with speech or a previously developed system of communication not dependent on speech.
- Applicant has a demonstrated potential to adhere to the social decorum and requirements of the University of Alabama and other community locations (e.g. appropriate interactions with persons regardless of race, religion, gender, or disability).

Program Requirements:

- Perform basic work skills that will be needed on most employment training sites
- Participate in classroom lessons and activities designed to improve student development in IDEA mandated transition areas of employment preparation, community access, independent living, and recreation/leisure.
- Interact socially (when appropriate) with co-workers and others associated with CrossingPoints
- Self-regulate or demonstrated potential to learn to self-regulate in order to limit behaviors that impede the learning of self or others

Stipends: Work stipends are awarded contingent upon availability of funds for the sole purpose of teaching the relationship of work and pay. Work experience and placement is solely for skill development, not employment (see http://www.dol.gov/whd/FOH/ch64/64c08.htm).

Interview Review Date: To be announced

Potential Outcomes of Participating in CrossingPoints- Improvement and/or acquisition of community referenced:

- Work/Employment Skills
- Daily Living Skills
- Social Skills
- Leisure/Recreation Skills
- Personal Physical Fitness

Application Due Date: Friday, February 7, 2020

CrossingPoints 1060 Barnes Education Center Box 870232 Tuscaloosa, AL 35401 205-348-3180



REFERRAL PACKET FOR CROSSINGPOINTS

The following documents are required for admission to CrossingPoints. Each item in the following list must be completed and received by the CrossingPoints Program **no later than Friday**, **Feb. 7, 2020**.

The CrossingPoints Admissions Committee will meet on a Friday in March. Appointments will be scheduled for interviews with the students <u>and</u> his/her parents or guardian upon receipt of a completed referral packet.

Documents required to be considered for admissions to CrossingPoints

- Checklist of Completed Application Materials
- "Referral for admission to CrossingPoints" (to be completed by referring teachers)
- Letter of recommendation from current special education teacher
- Admissions Rubric (completed by the current Special Education Teacher)
- Copy of Current Individual Education Plan (IEP)
- Copy of most recent psychological evaluation report and MEDC report
- Adaptive behavior scale completed within the past 12 months The Adaptive Behavior Scale must be scored!
- Transition Planning Inventories (to be completed by both the teacher and parent/guardian)
- "Parent/Guardian Transition Survey" (to be completed by parent/guardian)
- "Transition Planning Assessment" (to be completed parent/guardian)
- Letter stating that the student is a client with the Ability Alliance/Tuscaloosa County Mental Retardation Authority (telephone: 333-1577)
- Letter stating that the student is a client with the Alabama Department of Rehabilitation Services (telephone: 554-1300)

Documents required if accepted for admission to CrossingPoints

- Copy of student's State of Alabama non-driver identification card, driver's permit, or driver's license.
- Copy of student's Social Security Card, Birth Certificate, and Health Insurance Card.
- Student Information / Medical Alert Form
- CrossingPoints Medication Prescriber / Parent Authorization Form
- Permission to Participate in Recreational / Leisure Activities, Photo Release, Transportation, Participation in Research Investigations, Participate in School-Based / Community Work Program, and Student Contract Forms
- Each Student admitted into CrossingPoints must have a personal bank account at a local financial institution (checking/savings). A copy of a voided check must be provided.



Checklist of Completed Application

Please confirm that all of the following documents have been completed with the required information and signatures. Incomplete application packets will delay the application review and may not be considered for application this year.

Complete Applications are due on or before Friday, February 7, 2020

Teach	er Packet
1.	Application Checklist (signed by parent/guardian, student, and teacher)
2.	Referral for Admission (completed by referring teacher and parent)
3.	One Letter of Recommendation (from current Special Education Teacher)
4.	Admissions Rubric (completed and signed by special education teacher)
5.	Transition Planning Inventory- School (completed by special education teacher)
6.	Copy of current IEP
7.	Copy of most recent eligibility report
8.	Scored Adaptive Behavior scale completed within the past 12 months
<u>Paren</u>	t Packet
1.	Application Checklist (signed by parent/guardian, student, and teacher)
2.	Referral for Admission (completed by referring teacher and parent)
3.	Parent/Guardian Transition Survey (completed by parent/guardian)
4.	Transition Planning Assessment (completed by parent/guardian)
5.	Transition Planning Inventory- Home (completed by parent/guardian)
6.	Letter from Ability Alliance
7.	Letter from The Alabama Department of Vocational Rehabilitation Services
	An interview with the applicant and parent/guardian is required. If the applicant meets all the basic eligibility requirements, you will be contacted to schedule this interview.
informand ra	completed all the required application requirements with accurate nation and have included them in the application packet. Misleading comments atings regarding aggressive behavior which cannot be dealt with in an open rsity environment may result in program dismissal.
Paren	t/Guardian Signature: Date:
Teach	ner Signature: Date:
Stude	nt Signature: Date:



Referral for Admission to CrossingPoints (PLEASE PRINT)

Student Name (first, middle,	last)	
Grade		
School in Which Student is C	Currently Enrolle	ed
Student's Date of Birth		Ασε
Student's Social Security Nu	ımber	
Parent's Name(s)		
Address		
City	Zip Code	Email:
Home Telephone Number		Cellular Telephone Number
Place of Employment		Work Telephone Number
Student's Area of Exceptions	ality (as listed on	Email: Cellular Telephone Number Work Telephone Number the Eligibility Report):
 If student has multiple disa hearing impairments, etc.) 	bilities, list all ar	reas of concern (for example visual, physical/motor, or
■ Has the student ever comm If yes, Explain:		
■ Does the student's IEP incl	ude social, emotic	onal, or behavioral goals? ☐ Yes ☐ No
If yes, what specific goals a	re included in the	ese areas?
■ Is the student receiving spe speech, OT, PT, assistive tech		lated services or special instructional factors? (including e programing, etc.):

ullet Does the student have a Behavior Intervention Plan? \Box Yes \Box No

(Student Name) • Was a Functional Behavior Assessment completed prior to the development of the Behavior
 Was a Functional Behavior Assessment completed prior to the development of the Behavior Intervention Plan? □ Yes □ No
■ If yes, list the function of the challenging behavior as well as the target behaviors for which the plan
was written.
■ Does the student currently take medication? □ Yes □ No
■ If yes, please list the prescription(s) and over the counter medication(s) the student currently takes and why.
List student's areas of strength (including academic skills, work skills, social skills, etc.):
\blacksquare Does the student have, or have had in the last 3 years a school health care plan? \Box Yes $\ \Box$ No
\blacksquare Has the student expressed the desire to develop employment-related skills? \Box Yes \Box No
• If student has participated in job skills training, please list places of training and activities performed on each job site:
■ Does the student require increased levels of supervision for medical, behavioral, or other reasons? □ Yes □ No
■ If yes, please specify why and what type of increased supervision is needed.
■ CrossingPoints provides a series of work experiences that require mobility. Does the student have any limitations that would affect his/her independence in these activities? \Box Yes \Box No
If yes, Explain:



Transition Planning Inventory School Form

Section I. Student Information
Student's Name
Date
Birth Date Age Sex M 🗆 F 🗆
School Grade
Name of Person Completing Form

Section II. Likely	Postschool Setting(s)
Directions: Fill in based on what you expect will happen a EMPLOYMENT/FURTHER EDUCATION OR TRAINING work competitive supported part-time other	
 □ community-based employment training □ vocational/technical school □ GED □ college/university □ other 	☐ live with others who are not related to him/her (with adult supervision)☐ other

Section III. Planning Area Inventory

Directions: Rate the student based on his/her current level of competence for each statement listed, using a scale of 0 (for *strongly disagree*) to 5 (for *strongly agree*) to indicate your level of agreement with each statement. Circle the number that reflects your rating.

If a statement is not an appropriate outcome for planning for the student, circle "NA" (for "not appropriate"). If a statement is appropriate but you do not know the student's level of competence on which to base your decision, circle "DK" (for "don't know").

	Planning Areas	Not Appropriate	Strongly Disagree 0	1	2	, 3	4	Strongly Agree 5	Don't Know
	EMPLOYMENT								9
1.	Knows the requirements and demands of his/her preferred occupations.	NA	0	1	2	3	4	5	DK
2.	Makes informed choices among occupational alternatives, based on his/her own interests, preferences, and abilities.	NA	0	1	2	3	4	5	DK
3.	Knows how to get a job.	NA	0	1	2	3	4	5	DK
4.	Demonstrates general job skills and work attitudes preferred by employers for keeping a job and advancing—may include supported employment.	NA	0	1	2	3	4	5	DK
5.	Has the specific knowledge and skills needed to perform a particular skilled, semi-skilled, or entry-level job—may include supported employment	NA t.	0	1	2	3	4	5	DK

		Not	Strongly Disagree	9				Strongly Agree	Don"
	Planning Areas	Appropriate	0	1	2	3	4	5	Knov
	FURTHER EDUCATION/TRAINING								
firs	t all of the statements in this section (Items 6–10) ma at setting(s) after high school. For those that do <i>not</i> a ing for each statement.	y apply, given pply, circle "N	the studer A." For tho	nt's in ose th	nteres hat <i>do</i>	ts and apply	l prefe y, circl	erences fo e the app	r his/he ropriat
6.	Knows how to gain entry into an appropriate postschool community employment training program.	NA	0	1	2	3	4	5	DK
7.	Knows how to gain entry into a General Education Development (GED) program.	NA	0	1	2	3	4	5	DK
8.	Knows how to gain entry into an appropriate vocational/technical school.	NA	0	1	2	3	4	5	DK
9.	Knows how to gain entry into an appropriate college or university.	NA	0	1	2	3	4	5	DK
10.	Can succeed in an appropriate postsecondary program.	NA	0	1	2	3	4	5	DK
FIRM 100	DAILY LIVING								
11.	Maintains personal grooming and hygiene.	NA	0	1	2	3	4	5	DK
12.	Knows how to locate a place to live in the community—may include using agencies that provide supported living options.	NA	0	1	2	3	4	5	DK
13.	Knows how to set up an apartment, house, or other setting.	NA	0	1	2	3	4	5	DK
14.	Performs everyday household tasks.	NA	0	1	2	3	4	5	DK
15.	Manages own money.	NA	0	1	2	3	4	5	DK
16.	Uses local transportation systems when needed.	NA	0	1	2	3	4	5	DK
	LEISURE ACTIVITIES								
17.	Performs various indoor leisure activities.	NA	0	1	2	3,	4	5	DK
18.	Performs various outdoor leisure activities.	NA	0	1	2	3	4	5	DK
19.	Uses settings that provide various types of entertainment.	NA	0	1	2	3	4	5	DK
	COMMUNITY PARTICIPATION								
20.	Knows his/her basic legal rights.	NA	0	1	2	3	4	5	DK
21.	Participates as an active citizen.	NA	0	1	2	3	4	5	DK
22.	Makes legal decisions affecting his/her life.	NA	0	1	2	3	4	5	DK
	Locates appropriate community services and resources.	NA	0	1	2	3	4	5	DK
	Knows how to use a variety of services and resources successfully.	NA	0	1	2	3	4	5	DK
	Knows how to obtain financial assistance from specific state/federal agencies.	NA	0	1	2	3	4	5	DK

	Planning Areas	Not Appropriate	Strongly Disagree 0	1	2	3	4	Strongly Agree 5	Don't Know
	HEALTH								
26.	. Maintains good physical health.	NA	0	1	2	3	4	5	DK
	Addresses physical problems that arise.	NA	0	1	2	3	4	5	DK
	Maintains good mental health.	NA	0	1	2	3	4	5	DK
	Addresses mental health problems that arise.	NA	0	1	2	3	4	5	DK
	Knows how reproductive system works.	NA	0	1	2	3	4	5	DK
	Makes informed choices regarding sexual behavior.	NA	0	1	2	3	4	5	DK
	SELF-DETERMINATION								
32.	Recognizes and accepts own strengths and limitation	ns. NA	0	1	2	3	4	5	DK
33.	Expresses feelings and ideas to others appropriately.	NA	0	1	2	3	4	5	DK
34.	Expresses feelings and ideas to others confidently.	NA	0	1	2	3	4	5	DK
35.	Sets personal goals.	NA	0	1	2	3	4	5	DK
36.	Makes personal decisions.	NA	0	1	2	3	4	5	DK
	COMMUNICATION			-	***************************************				
Cho	oose rating based on future settings in which individu	al will be.							
37.	Has needed speaking skills—may include sign language or alternative/augmentative communication.	NA	0	1	2	3	4	5	DK
38.	Has needed listening skills—may include sign language, speech reading, or other assistive technology/services.	NA	0	1	2	3	4	5	DK
39.	Has needed reading skills for acquiring information from written materials—may include tactile systems or other assistive technology/services.	NA	0	1	2	3	4	5	DK
40.	Has needed writing skills—may include Braille systems and alternative/augmentative communication.	NA	0	1	2	3	4	5	DK
	INTERPERSONAL RELATIONSHIPS								
41.	Gets along well with family members—may include parents, siblings, or other relatives.	NA	0	1	2	3	4	5	DK
42.	Demonstrates knowledge and skills of parenting.	NA	0	1	2	3	4	5	DK
43.	Establishes and maintains close and/or casual friendships in a variety of settings.	NA	0	1	2	3	4	5	DK
44.	Displays appropriate social behavior in a variety of settings.	NA	0	1	2	3	4	5	DK
45.	Demonstrates skills for getting along well with coworkers.	NA	0	1	2	3	4	5	DK
46.	Demonstrates skills for getting along well with supervisor.	NA	0	1	2	3	4	5	DK

	Strongly					Strongly
Diaming Area	Disagree 0	1	2	3	4	Agree 5
Planning Areas						<u> </u>
ADDITIONAL PLANNING AREAS						
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
				***********	10,4210111000	
Section IV. Additional	Comments					
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