

Admission Application

SUNY Schenectady, SUNY Cobleskill, Hudson Valley Community College



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Congratulations on your decision to apply to CareerNext! CareerNext is a program hosted at SUNY Schenectady Community College, SUNY Cobleskill and Hudson Valley Community College and run by Living Resources. Through CareerNext, academically-able young adults will receive the support they need to succeed and obtain a credited career certificate, associate or bachelor's degree from SUNY Schenectady SUNY Cobleskill or HVCC. They will take college credited courses, live in dorms (where applicable) and become part of a thriving and mutually-supportive community of peers.

Below is a checklist that you can use as your guide, as you complete each step in the application process. We look forward to hearing from you!

APPLICANT DIRECTIONS

1. Complete the application. **(Not to be completed by parents.)**

There are three ways to submit your application. **Print and complete** this application and then either:

- **Fax** to (518) 862-2175
- **Mail** to address below
- **Scan and email** to Kristin McInerney (kmcinerney@livingresources.org)

2. Please submit the following documents with your application:

- High School Transcript
- Individualized Education Plan (IEP) or 504
- Most Recent Psych Evaluation
- Parent Form

If mailing documents, please send to:

CareerNext

Attn: Kristin McInerney
Living Resources Corporation
300 Washington Avenue Extension
Albany, NY 12203

OUR GOALS FOR GRADUATES

- To obtain a credited certificate, associate degree or bachelor's degree
- To financially support themselves by working a part- to full-time job after completion of their degree

MINIMUM REQUIREMENTS FOR ADMISSION

1. Commitment to live independently with minimal support.
 - Ability to be at home without supervision
 - Some experience of being independent in the community
2. Ability to independently complete all daily living tasks.
 - Examples: Waking up, hygiene, medications, dressing, chores, etc...
3. Motivated to learn and participate in discussions and conversations with instructors and students.
4. Motivated to independently complete in-class assignments and homework, and ability to independently follow a schedule.
5. Ability to get along with others, follow code of conduct of the college and respective facilities
6. Ability to attend college courses without supervision.

Students with Autism or documented learning differences who are looking to obtain an accredited certificate or degree are welcome to apply. Students must obtain admission to both CareerNext and the college. All students will be held to the academic standards and requirements of the college in order to maintain eligibility throughout the duration of the program.

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APPLICANT DIRECTIONS

_____ Last Name	_____ First Name	_____ Middle Name
_____ Birthday	<input type="checkbox"/> Male <input type="checkbox"/> Female	
_____ Phone Number	_____ Email Address	
_____ Social Security Number	_____ Country of Birth	
_____ Home Address	_____ City	
_____ State/Province	_____ Zip	_____ County
Are you enrolled in the NY START Program? <input type="checkbox"/> Yes <input type="checkbox"/> No		

PARENT / GUARDIAN INFORMATION

Parent / Guardian Type Father Mother Guardian

_____ Last Name	_____ First Name	_____ Middle Name
_____ Phone Number	_____ Email Address	_____ Occupation

Parent / Guardian Type Father Mother Guardian

_____ Last Name	_____ First Name	_____ Middle Name
_____ Phone Number	_____ Email Address	_____ Occupation

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COLLEGE ENROLLMENT

I will be applying to the College as a: New Freshmen Student Transfer Student Other

Expected Semester & Year of Enrollment Fall Spring Summer Year _____

Complete the sections below for all locations you have applied to

SUNY Cobleskill

Selected Major _____ Associates Degree Bachelor's Degree

Minor _____ Certificate _____

Have you received admission from the College? Yes No

If you are currently enrolled with the College, when did you begin courses? _____

Are you looking to live on campus or commute? On Campus Commute

If you are interested in living on campus, do you want to learn more and or apply for a housing accommodation? Yes No

Are you looking to attend the College with a service animal? Yes No

SUNY Schenectady

Selected Major _____ Certificate AS AAS

Have you received admission from the College? Yes No

If you are currently enrolled with the College, when did you begin courses? _____

Select the services you are interested in obtaining with CareerNext:

Academic support services only

Academic support services and a one-year lease at College Suites with light residential supports

Hudson Valley Community College

Selected Major _____ Certificate AA AS AAS AOS

Have you received admission from the College? Yes No

If you are currently enrolled with the College, when did you begin courses? _____

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MEDICAL INFORMATION

Do you take medications? Yes No

Drug	Dosage	Time of Dispense	Comments

Do you take these independently? Yes No

If no, please explain your medication management plan if selecting on-campus housing:

Do you have a history of seizures? Yes No

If yes, please explain:

Do you currently have counseling services? Yes No

If yes, frequency:

LIFE AT SCHOOL

Name of High School

City and State

Year of Graduation

Type of Diploma Received / Anticipated

Did you or do you have a behavior support plan? Yes No

If yes, please attach

What type of services did you receive in high school?

Select all that apply

- | | | |
|---|--|--|
| <input type="checkbox"/> Self-Contained Classes | <input type="checkbox"/> Resource Room | <input type="checkbox"/> Consultant Teacher |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Inclusion Classes | <input type="checkbox"/> Speech |
| <input type="checkbox"/> Adaptive Physical Education (PE) | <input type="checkbox"/> Occupational Therapy (OT) | <input type="checkbox"/> Physical Therapy (PT) |
| <input type="checkbox"/> Other _____ | | |

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LIFE AT SCHOOL (CONTINUED)

Did you take the SAT / ACT? Yes No

If yes, what were your scores? SAT _____ ACT _____

What was your favorite subject? _____

What was your least favorite subject? _____

What supports have you received in the past which you found beneficial? _____

What areas will you need extra help in? _____

What activities were you involved with in and out of school? _____

If you have attended any school, college or program after high school, please fill out information below

Name of High School City and State From – To Dates

If attended college, please answer the following:

Major # of Credits Received

Reason for leaving _____

Did you dorm there? Yes No

If yes, any issues or concerns? _____

**If you have credits from another institution, please have an official transcript sent to the college admissions office and to Kirsten McInerney.*

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PERSONAL INFORMATION

Formal Diagnosis: _____

What are your strengths? _____

What areas do you struggle with? _____

Any history of, or current legal difficulties? Yes No If yes, please explain: _____

Have you ever been convicted of a misdemeanor or felony? Yes No

If yes, please explain and provide dates: _____

Any history of, or current difficulties with violence to self, others, or property? Yes No

If yes, please explain and provide dates: _____

Are you your own legal guardian? Yes No If no, who is your legal guardian? _____

Have you every run away before? Yes No If yes, please explain: _____

Have you ever been hospitalized for psychological reasons? Yes No

If yes, please provide dates and reason for hospitalization: _____

REFERRAL INFORMATION

Last Name

First Name

Phone Number

Relationship to You

By signing below, I certify all information is true and correct to the best of my knowledge. Omission to information or false reporting could lead to dismissal after admission.

Applicant Signature

Date