



College 101: Ready, Set, Go! Program Application

Thank you for your interest in Faison's College 101 Program! Please complete the application below and provide the requested documents when you return the application to us. If possible, complete the application in your own handwriting. If handwriting presents a challenge, you may type your responses.

Applications must be received by **May 1, 2020**.

An application to the College 101 program is considered “complete” and will be accepted only if it includes:

- A clinical psychological evaluation (school-based, or psycho-educational evaluations, are acceptable) dated within three years of this application;
- The most recent IEP, if one is in place for a current student.
- For students who have previous college experience: an *unofficial* transcript from that institution, or other documents that detail classes taken and grades earned.

Each completed application will be reviewed thoroughly by staff to ensure all requirements are met. Those applicants who do meet the requirements—and who have documentation that suggests the College 101 Program may be a good fit for their specific needs—may be invited for a face-to-face interview. Based upon that interview and the information gathered from the application process, prospective students will be invited into the College 101 Program. Formal notification of the decision will be made by mail or email.

When completed, please return this application to:

College 101 Admissions
The Faison Center
1701 Byrd Avenue
Richmond, VA 23230

Biographical Information:

Applicant Name: _____

Nickname, or the name you prefer to be called: _____

Street or mailing address: _____

City: _____, State: _____ Zip code: _____

Home telephone: _____ Cell Phone: _____

Email: _____

Date of birth: _____ Age: _____ Sex: _____ Citizenship: _____

Father's Name: _____ Mother's Name: _____

Father's email: _____ Mother's email: _____

Diagnostic Information:

Please list any diagnoses that have been formally assessed related to your interest in this program:

Please list the name and contact information of the licensed professional who provided the ASD diagnosis, along with the date the diagnosis was given.

Diagnostician name: _____

The diagnostician is a (check one): _____ Licensed psychologist; _____ Licensed psychiatrist;

_____ Licensed medical doctor; _____ other (write-in): _____

Do you currently receive support services? (For example: tutoring or special services for Autism Spectrum Disorder, learning disabilities; speech and language therapy; occupational therapy)

_____ Yes (If "Yes," please explain briefly what services you receive)

_____ No

Current services include: _____

Personal Statements:

Please describe how you learn best: _____

My academic strengths include: _____

My academic challenges include: _____

In College, I think I will require assistance with: _____

I'm interested in attending the Faison's College 101 Program because:

Something more I'd like you to know about me: _____

Regarding the dorm experience, please describe your experience living outside of your parent's home (whether spending the night or weekends with friends and relatives or taking trips with school):

I think I will need help with the following when I am in College (check all that apply):

- Finding my way around campus
 - Purchasing my meals
 - Doing my laundry
 - Using public transportation
 - Following my course schedule
 - Meeting new people
 - Talking with my professors
 - Using the student services such as the library and gym
 - Living with a roommate
 - Keeping my room clean and my belongings organized
 - Getting to class on time
 - Completing assignments
- Other (please list):
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Participating in The College 101 Program requires that students accept individualized support from a staff member in the areas of academics, socialization, and independent living. How comfortable are you when talking about or receiving support for an Autism Spectrum Disorder?

- Very Uncomfortable
- Somewhat Uncomfortable
- Comfortable
- Somewhat Comfortable
- Very Comfortable
- Other _____

Educational Information:

Please list in chronological order the high school(s) and college(s) you have attended, beginning with the most recent at the top. Report diplomas or types of certificates you received.

Name of school	Dates attended	Certificate or diploma

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Discuss your academic interests: _____

What do you do in your free time? _____

With what sports, clubs or organizations are you currently involved? _____

What have you accomplished that has made you the most proud? _____

By my signature below, I attest that the information provided in this document is accurate.

Signature:

Printed Name:

Date:
