Pioneer Pipeline Transition Program

A Pipeline to Education, Recreation, and Employment

Application for Admission

Warren Local Schools and Marietta College has teamed up to provide an exciting option for individuals with disabilities, of transition age, to improve their quality of life and post-school outcomes. This transition program will provide students the opportunity to engage in the Marietta College campus through participation in academic courses, functional living skill instruction, community activities, mentor program, and internships.

Student opportunities include, but not limited to, the following:

Social skill development with Marietta College student mentors.

Meal planning, grocery shopping, and meal preparation in model apartment.

Dining etiquette and socializing in the campus cafeteria and local restaurants.

Pedestrian safety in and around campus.

Employment skill development through internships, both on and off campus.

Pioneer Pipeline Admission Criteria

Student with an active ETR and IEP who demonstrates the following:

Functional communication skills (independent or with the use of assistive technology).

Ability to maintain appropriate behavior in a variety of settings.

Willingness to learn new skills –safety, social, functional, employability.

Consistent attendance.

Interest in participating in recreational opportunities.

Ability to accept feedback and direction then modify performance.

Willingness to follow college and program rules.

Application Requirements

Complete following pages.

Official transcript from home school.

Current ETR and IEP – preferably in electronic form.

Physical Evaluation – may use the OHSAA Pre-participation Physical Evaluation Form.

Submit forms: electronically- [wl\_lspence@warrenlocal.org](mailto:wl_lspence@warrenlocal.org)

U.S. mail or in person- 220 Sweetapple Road, Vincent, OH 45784

For additional information: Larry Ryan - Director, Special Programs [wl\_lryan@warrenlocal.org](mailto:wl_lryan@warrenlocal.org) 740-678-2366

Applicant Information:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_

Last First M.I. MM/DD/YYYY

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City Zip Code

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Applicant) Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Applicant)

Are you your own guardian? Yes No

Parent(s)/Guardian(s) Information:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First M.I.

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Not necessary is same as applicant Street City Zip Code

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to applicant: ­\_\_\_\_\_\_\_\_\_\_\_\_­\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Not necessary is same as applicant Street City Zip Code

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to applicant: ­\_\_\_\_\_\_\_\_\_\_\_\_­\_

Release of Information:

If applicant is own guardian:

By signing, I consent to Warren Local & Marietta College personnel associated with the Pioneer Pipeline Transition Program access to educational documents (transcript, ETR, IEP, etc) and permission to speak with family members, stakeholders, school personnel, and agency personnel as part of my application review.

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Applicant Signature Date

If applicant is Not own guardian:

By signing, I consent to Warren Local & Marietta College personnel associated with the Pioneer Pipeline Transition Program access to my son/daughter’s educational documents (transcript, ETR, IEP, etc) and permission to speak with family members, stakeholders, school personnel, and agency personnel as part of my son/daughter’s application review.

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Parent/Guardian Signature Date

Applicant Profile: (To be completed by applicant, parent/guardian, and/or home school teacher)

Requires Direct Support Requires Cues/Prompts Independent but Inconsistent Independent

Self-Care (Toileting)

Self-Care (Eating)

Relations w/Supervisors

Relations w/Peers

Follows Rules

Pedestrian Safety

Meal Preparation

Medication(s)/Instructions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Applicant Health Needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Applicant strengths: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Applicant interests: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Anticipated outcome(s) from participation in the Pioneer Pipeline Transition Program:

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Other information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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