



College to Career (C2C) is an innovative program offered through North Orange Continuing Education. We will be accepting a Cohort of students for the **Fall 2022** school year. College to Career is for adults with Intellectual Disabilities (ID) or developmental disabilities similar to ID who would like to attend college, gain work experience, and achieve integrated employment in career areas of their choice.

All applications and eligibility criteria will be reviewed by C2C staff. Students who meet eligibility criteria and who submit completed applications will be invited to an interview on one of our three campuses or online. Letters will be email and/or mailed to your home to inform you of the panel's decision. Applicants not selected for an interview will also be notified with ideas for redirection and other supports.

College to Career will not accept incomplete applications. Please be sure to complete the entire application to the best of your abilities and then submit it along with documentation of disability to the email address below. If you have questions or need help and assistance in completing your application, please contact Marta Gamez at mgamez@noce.edu.

Submit your completed applications via email to:
CollegetoCareer@noce.edu or mgamez@noce.edu

In order to be considered for the College to Career program you must meet all of the following criteria:

- Be at least 18 years of age
- Verification of an Intellectual Disability or developmental disabilities similar to ID
- Eligible for Department of Rehabilitation services
- Have the willingness to learn to travel independently e.g. by bus
- Possess necessary documentation in order to work (e.g., Social Security card, Green card, etc.)
- Want to enroll in at least one inclusive class through the North Orange County Community College District
- Goal to work independently

COLLEGE TO CAREER

Today's Date: _____

Personal Information:

Student's Name: _____

Banner ID #: _____ Campus: ☐ Cypress College ☐ Fullerton College ☐ NOCE

Do you have a social security card? ☐ Yes ☐

Date of Birth: Month _____ Day _____ Year _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone (____) _____ Home Phone (____) _____

Email address: _____

Secondary contact: _____ Relationship: _____

Home Phone (____) _____ Alternate Phone (____) _____

Are you conserved? ☐ Y ☐ N

Service Agencies:

Regional Center:

☐ RCOC ☐ HRC ☐ SCLARC ☐ ELARC ☐ Westside ☐ Other _____

Service Coordinator _____ Phone: (____) _____ ext _____

Address _____ City _____ State _____ Zip _____

Email address: _____

Dept of Rehabilitation:

Counselor: _____ District Office: _____ Phone: (____) _____ ext _____

Address: _____ City: _____ State: _____ Zip: _____

Email address: _____

Verification of Disability:

I have attached the following documentation to show verification of an Intellectual Disability or Autism Spectrum Disorder:

☐ Most recent Regional Center IPP ☐ Most recent CDER ☐ Testing/Assessments

☐ Other _____

OR

☐ I have requested that my Regional Center service coordinator email my most recent IPP and CDER to mgamez@noce.edu

COLLEGE TO CAREER

Education Information:

Education completed:

☐ GED ☐ High School Diploma ☐ Certificate of Completion

Name of High School: _____ Year Graduated: _____

Name of other School Attended: _____ Year Graduated: _____ Degree/certificate: _____

Are you currently part of an Adult Transition Program? ☐ Yes ☐ No

If you are, when do you plan on graduating or transitioning out of the program? _____

Are you currently enrolled in the NOCCCD? Please check: ☐ Cypress College ☐ Fullerton College

☐ NOCE

List your program or major: _____

Work Experience:

☐ I have no prior work experience

Employer: _____ ☐ Paid ☐ Volunteer

Position: _____ Phone: (____) _____

Employer Address: _____

Duties performed: _____

Dates of employment _____ to _____ Beginning wage _____ Ending wage _____

Immediate Supervisors Name: _____ Phone: (____) _____

How many hours did you work a week? _____

How did you find this job? _____

Why did you leave this job? _____

Did you have a job coach? ☐ Y ☐ N Agency Name: _____

What kind of supports did you have? _____

Employer: _____ ☐ Paid ☐ Volunteer

Position: _____ Phone: (____) _____

Employer Address: _____

Duties performed: _____

Dates of employment _____ to _____ Beginning wage _____ Ending wage _____

Immediate Supervisors Name: _____ Phone: (____) _____

How many hours did you work a week? _____

How did you find this job? _____

Why did you leave this job? _____

Did you have a job coach? ☐ Y ☐ N Agency Name: _____

What kind of supports did you have? _____

Employer: ____ ☐ Paid ☐ Volunteer

Position:____ **Phone:** (____)____

Employer Address: ____

Duties performed:____

Dates of employment ____ to ____ **Beginning wage** ____ **Ending wage** ____

Immediate Supervisors Name: ____ **Phone:**(____)____

How many hours did you work a week? ____

How did you find this job? ____

Why did you leave this job? ____

Did you have a job coach? ☐Y ☐ N **Agency Name:**____

What kind of supports did you have?____

COLLEGE TO CAREER

Vocational Interests:

What kind of job would you like to have?(Please Check your top three choices)

- | | | | |
|---|--|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Department Store | <input type="checkbox"/> Restaurant | <input type="checkbox"/> Janitorial | <input type="checkbox"/> Warehouse |
| <input type="checkbox"/> Home Health Aide | <input type="checkbox"/> Grocery Store | <input type="checkbox"/> Fast Food | <input type="checkbox"/> Automotive |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Entertainment | <input type="checkbox"/> Security | <input type="checkbox"/> Childcare |
| <input type="checkbox"/> Hair or Nail Salon | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Car Wash | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Elderly Care | <input type="checkbox"/> Horticulture | <input type="checkbox"/> Other _____ | |

What skills do you have that would help you to be successful in the above job?

Workplace Accommodations:

What workplace accommodations have you received in the past during your previous employment?

What workplace accommodations will you need to be successful on the job?

Support System:

Networks/Support Systems:

Does your family/support system support you in your desire to take inclusive courses?

☐ Y ☐ N

Does your family/support system support you in your desire to get a job? ☐ Y ☐ N

COLLEGE TO CAREER

Other Information:

Legal issues:

Have you been arrested? ☐ Y ☐ N If no legal issues please skip to next section.

What were you arrested for? ____ date ____

☐ Adult ☐ Minor ☐ Misdemeanor ☐ Felony ☐ Traffic ☐ Criminal ☐ Civil
☐ City ☐ County ☐ State ☐ Federal

Do you have any Convictions? ☐ Y ☐ N

What were the Convictions? ____ date ____

☐ Adult ☐ Minor ☐ Misdemeanor ☐ Felony ☐ Traffic ☐ Criminal ☐ Civil
☐ City ☐ County ☐ State ☐ Federal

Are you on probation? ☐ Y ☐ N **Parole?** ☐ Y ☐ N ☐ Formal ☐ Informal

Conditions of probation or parole ____

Legal restriction ____

Have you ever had a Temporary Restraining Order? ____

Transportation Information:

Transportation Information:

How do you plan on getting to and from work every day?

☐ Walk ☐ Drive Self ☐ Family Drives ☐ City Bus ☐ Access ☐ Diversified
☐ Dial a Ride ☐ Bike ☐ Other ____

Do you know how to read the bus schedule? ☐ Y ☐ N

Safety Information:

Safety:

Do you carry your personal ID? ☐ Y ☐ N

Who would you contact in an emergency? ____

What would you do if you were lost? ____

Would your family be worried if you were home alone for 4-6 hours? ☐ Y ☐ N

COLLEGE TO CAREER

Goals :

In your words, please tell us about your following goals:

Independent Living:

Mobility or Transportation:

Education:

Vocational:

Personal Statement:

Why you want to be in the College to Career Program? How do you think College to Career will benefit you?
