



Student Application

*“Building relationships,
making connections, transforming lives”*



Community Based Transition Center

What is the Community Based Transition Center (CBTC)?

A program that provides transition related services and instruction with a community focus for adult students aged 18-21 who are eligible for special education services in the Richland School District. Students in this program will focus on learning how to successfully engage with their community through Community Based Instruction, small group work cohorts, transportation training and independent living skills. Students will complete their High School and Beyond Plan while enrolled in the CBTC.

Eligibility

Adult students, ages 18-21, currently accessing self-contained instructional placement at a district high school are eligible for this program

- Currently accessing self-contained instructional placement at a district high school, who benefit from high level of staff support
- DDA eligibility
- Ability to work independently for at least 5 minutes
- Ability to maintain safe behavior within the community
- Have met all graduation requirements, except High School and Beyond Plan

Enrollment Process

Student placement in the CBTC program is made through the IEP process. Staff from the CBTC must be invited to the IEP held prior to the student enrolling in the CBTC program.

Staffing

Special Education Teacher, Career & Technical Education Teacher, (3) Job Coaches

Agency Connections

Students in the program will have regular access to outside agencies including the Department of Vocational Rehabilitation (DVR) and Developmental Disabilities Administration (DDA). Connections between disability related organizations within the community will be under ongoing development.

Related Services

All Related Services and Specially Designed Instruction will be provided for adult students enrolled at CBTC based on their IEP. Each of these services will be provided with a Transition focus in mind.

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CHECKLIST

Please complete each section of the following application. Incomplete applications will not be accepted.

The following requirements must be met before the application process can begin:

- Student is age 18 on or before August 31st of the year entering the program
- Student has 24 credits or has enough credits approved from counselor
- Student has met state testing requirements
- High School and Beyond Plan has **NOT** been completed

Students will be required to:

- Attend CBTC Information Night
- Obtain a Washington State ID Card ([Application](#))
- Invite CBTC staff (Amy DesChane or Laurie Price) to annual IEP
- Dial A Ride Eligibility - Ben Franklin Transit [Dial-A-Ride Application](#) ([Spanish](#))
(Complimentary pass provided by RSD)

Submit the following documents with your completed application:

- Transcripts
- BIP/ERP*
- Health Plan*
- IEP
- Current High School and Beyond Plan
- Legal Guardianship Court Documents (if applicable)

*if appropriate

Please return this application packet on or before May 20, 2022 to:

Community Based Transition Center
TLAC
6972 Keene Rd.
West Richland, WA 99353

Community Based Transition Center

APPLICATION

Student Name: _____

Date of Birth: _____ Age: _____ Home School: _____

Special Education Case Manager: _____

Parent/Guardian's Name: _____

Is student their own guardian? ____ YES ____ NO If no, please list the name of the Legal

Guardian: _____

*attach the legal court document showing guardianship

Student Residence: _____

City: _____ Zip Code: _____

Student Home Phone Number: _____

Student Cell Number: _____

Student Email: _____

Parent/Guardian Home Phone Number: _____

Parent/Guardian Cell Number: _____

Parent/Guardian Email: _____

DDA Case Manager: _____

DVR Counselor Name (if applicable): _____

Work Exploration/Experience

Students Future Employment Goals:

- Part-Time Employment
- Full-Time Employment
- Independent

Career Focus/CTE Work Experience

- Enclave/Group Supported
- OJT/In-Building

How many hours per week has the student participated in work experience? _____

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Have you ever been terminated and/or suspended from a job/work experience?

Yes

No

If yes, please explain: _____

Have you ever quit a job or work experience?

Yes

No

If yes, please explain: _____

Transportation

Do you have a current valid driver's license?

Yes

No

Do you have experience riding public transportation?

Yes

No

Do you live on or near a public bus route?

Yes

No

Are you currently eligible for Dial-A-Ride services?

Yes

No

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Adult Services

Which of the following agencies are you currently utilizing or have used in the past? (check all that apply)

- Developmental Disabilities Administration (DDA)
- Division of Vocational Rehabilitation (DVR)
- Social Security Administration (SSA)
- Mental Health Services
- Other community agency or supports: _____

Personal Advocacy - What helps you?

What is your disability? _____

Do you have any health issues? _____

Do you have any behavioral/social issues? _____

Describe any assistive technology or other supports that help you in the classroom or on the job: _____

Describe any challenges you may have to noise, personal space or touch. _____

Do you prefer to work alone or with others? _____

Do you have any difficulties working with others? _____

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Student Questions *Please have student participate in answering these questions.*

Why do you want to come to the Community Based Transition Center?

Are you prepared to work each day? _____

If no, why not?

What are your employment goals?

What do you like to do in your free time?

Next Steps

- Case manager will submit the completed application and all requested documents to CBTC @ TLAC. Incomplete applications will be returned.
- Once your completed application is received, you will be notified of your interview time with the Secondary Transition Team. The student will be interviewed at their home high school and will receive the questions prior to the interview.
- If accepted into the program, program recommendations and acceptance letters will be sent to the student's high school case manager, the student and family or guardian.

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Signatures

Student Signature _____

Date _____

Parent/Guardian Signature _____

Date _____

Special Education Case Manager Signature _____

Date _____

Home School Administrator Signature _____

Date _____

For CBTC Use ONLY			
Date Received		Received By	
Review Completed		Acceptance Sent	
Interview Scheduled			