

Summer Transition Program



INDEPENDENT LIVING CHOICES

Opening doors for people with disabilities

Application Deadline: Varies by office

Fee: **Varies by office** *due upon acceptance into program*

Ages: 16 – 21

2022 Dates: **Varies by office**

Time: **Varies by office**

Applicant Name:

Date of Birth:

Gender:

Address:

Guardian Name:

Guardian Phone:

Guardian Email:

Guardian Address:

School Name:

Approximate Graduation Date:

Special Education Teacher Name:

Teacher Contact Information:

Disability:

Do you have an IEP (Individualized Education Plan) or 504 **(please include a copy)**? Yes No

Are you currently working with a SBVI or Vocational Rehabilitation Counselor? Yes No

Please list any needed accommodations, dietary restrictions, allergies, or other comments here:

ILC may take photographs, written statements, video, or audio recordings of participants during the sessions. At times, these items may be used to promote or highlight the program. By signing the application for the 2022 Summer Transition Program, I consent to ILC's use of these items.

Applicant Signature

Date

Guardian Signature

Date
