

Scholars with Diverse Abilities Program Recommendation Form

From: Peer

Recommendation for _____ (applicant's name)

The above named individual is applying for admission to the Scholars with Diverse Abilities Program (SDAP) at Appalachian State University. Current SDAP students are highly motivated young adults who have received significant educational support during their previous educational experiences and would have difficulty succeeding in a traditional college degree program. Applicants should have a strong desire to become advocates for their personal wants and needs, and should possess the skills and maturity necessary to participate successfully in an inclusive college program.

With the above information in mind, please answer the following questions to the best of your ability and complete an Applicant Inventory (attached). Attach additional pages as needed.

Please return this form to the applicant in a sealed envelope and sign across the seal. The applicant has agreed as part of the application process to waive access to the recommendation form.

The applicant will submit all letters of recommendation as part of their completed Student Application Packet. Thank you for your assistance in this matter.

Your name _____
Last First Title

Address _____
(Street)

(City) (State) (Zip Code)

Phone # _____

Please answer the following questions regarding the applicant:

1. How do you know the applicant?
2. Please describe why you believe the applicant would benefit from being in the Scholars with Diverse Abilities Program. (Include information on how SDAP would aid the student in achieving their future employment, independent living, and/or other future goals.)
3. Please describe a time when you saw the applicant experience success and give details related to the situation including when, where, what happened, and the outcomes.
4. Please describe a time when you saw the applicant experience a failure/frustration and explain how the situation was handled.
5. Please share any information you feel is important related to the family's involvement in the applicant's life.
Information in your response might include:
 - An area of the applicant's life where parents/guardians are or are not especially involved (*sports, religious events, disability organizations, etc*)
 - Information related to parent/guardian dynamics (*ie- applicant lives with mother, but has relationship with father*)
 - Specifics related to applicant's relationships with other family members (*ie- applicant has a twin brother who is also applying to Appalachian State as a traditional student*)

***For all questions, please attach additional pages as necessary and label each page with the question number.**

Applicant Inventory

Applicant name _____

Recommender name _____

Independent Living and Social Skills	1 (requires complete assistance)	2 (needs moderate assistance)	3 (needs some assistance)	4 (needs some assistance)	5 (completely independent)	Comments/NA
Navigating/Finding way around						
Ordering and purchasing from a restaurant/cafeteria/store						
Handling personal affairs: laundry, light cooking, cleaning, managing personal belongings						
Ability to initiate social interaction						
Ability to sustain social interaction						
Engages in appropriate social interaction						
Use of judgment skills in an emergency situation						
Coping in stressful situations						
Communicates needs in an appropriate manner						
Uses cell phone, email, etc.						
Understanding of personal hygiene needs						
Handling personal finances						
Academic Skills	1 (requires complete assistance)	2 (needs moderate assistance)	3 (needs some assistance)	4 (needs some assistance)	5 (completely independent)	Comments/NA
Word processing on a computer						
Internet usage						
Social media usage						

Academic Skills (continued)	1 (requires complete assistance)	2 (needs moderate assistance)	3 (needs some assistance)	4 (needs some assistance)	5 (completely independent)	Comments/NA
Motivation to learn and persist on new tasks						
Ability to follow verbal directions						
Ability to follow written directions						
Ability to maintain a weekly calendar						

Thank you for completing these forms!

As a reminder, please return this form to the applicant in a sealed envelope and sign across the seal.

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