

Scholars with Diverse Abilities Program Recommendation Form From Teacher

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 extensive educational services in either public or private schools and would likely have considerable difficulty succeeding in a traditional college degree program. Applicants for the program should have a strong desire to become advocates for their personal wants and needs, and should possess emotional stability and maturity to participate successfully in this 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 _____

(City) (State) (Zip Code)

Organization: _____

Phone # _____

Please answer the following questions regarding the applicant:

1. How long have you known the applicant and in what capacity?

2. Please describe why you feel the applicant would benefit from a postsecondary education experience. (Include information on how the Scholars program would aid the student in achieving their future employment, independent living, and/or other future goals.)

3. How likely is it that the parent/family/guardian of this applicant will support the expectations and goals of the Scholars with Diverse Abilities Program?

The expectations and goals of the program include:

- Allowing students to engage in an internship/job experience for 5-10 hours weekly while enrolled in the Scholars Program
- Allowing students to manage money
- Participating in student development of self advocacy skills
- Allowing the student to make choices and aiding in guiding their paths
- Participating in Person Centered Plan meetings as requested

_____Unlikely _____Likely _____Quite Likely _____Highly likely

4. Please describe the strengths and challenges that the applicant may have that will make him/her a strong candidate for this program?

***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 |
|---|---|--------------------------------------|----------------------------------|----------------------------------|-----------------------------------|-----------------|
| Navigating/Finding way around campus environment | | | | | | |
| Ordering and purchasing from a restaurant/cafeteria/store | | | | | | |
| Handling personal affairs: laundry, light cooking, cleaning, managing personal belongings | | | | | | |
| Ability to sustain social interaction | | | | | | |
| Ability to initiate social interaction | | | | | | |
| Engages in appropriate social interaction | | | | | | |
| Use of judgment skills in an emergency situation | | | | | | |
| Copes with some stress | | | | | | |
| Communicates needs in an appropriate manner | | | | | | |
| Uses cell phone, email, etc. | | | | | | |
| 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 |
| Word processing | | | | | | |
| 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 |
| 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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