

# The Kennedy Collective @ Stratford YMCA

## Project SEARCH Application 2025-2026



# The Kennedy Collective @ Woodruff Family YMCA

## Project SEARCH Application 2025-2026

### Purpose:

The purpose of this application packet is to outline the skill set of the Project SEARCH candidate. This application enables the Selection Committee to properly assess each candidate's skills, abilities and background. A parent, candidate, counselor, or employer may be contacted by the Selection Committee to gather additional information. Our final goal is to select candidates who will be successful in a Project SEARCH program and reach the outcome of competitive employment.

### Selection criterion includes:

- High school candidates must be at least 18 years of age, have not graduated from high school, is on an IEP, and has an identified intellectual/developmental disability.
- High school candidates must have completed their high school program or credits needed to graduate.
- High school candidates have agreed that Project SEARCH will be their last year of school, and has the goal of working at the end of the program.
- Adult candidates must be ages 18-30, with an intellectual/developmental disability who are clients of the Department of Developmental Services (DDS) or DDS eligible.
  - Required Level of Support in DDS Level of Need (LON): Larger Group Support (one staff person for four or more people). By end of program, must be eligible for Periodic Support required for part of each day or time period spent on employment, day, or vocational activities.
  - Candidates must be able to participate without behavior supports.
  - Candidates must ensure with DDS that their Husky C is in place before applying for the program. DDS can't approve funding for Project SEARCH without Husky C being in place.
- Candidates who will benefit from participation in a variety of internships.
- Candidates who desire to work competitively at the end of the Project SEARCH program.
- Candidates who are motivated in using public transportation (when available) to access Project SEARCH program site.

### The Selection Process includes the following guidelines:

- Completing this application does not guarantee acceptance.
- Applicants must attend the Skills Assessment Day
- The Kennedy Collective Project SEARCH Selection Committee will review the applications. Representatives from Education, Host Business, DDS and The Kennedy Collective will review and participate in assessment day with each qualified candidate.
- The Selection Committee will only accept fully completed applications, including all documents referenced on page 3.
- If accepted, the candidate must complete an intake with The Kennedy Collective as well as be able to pass any requirements deemed necessary by the Host Business.

### 2025 – 2026 Timeline of Events:

- April 4<sup>th</sup> Applications Due
- April 9<sup>th</sup> Skills Assessment Day 6pm-8pm
- April 23<sup>rd</sup> Review of Applications by Selection Committee
- On/around April 25<sup>th</sup> Final Candidate Selection

### Please return the completed application and requested information postmarked or emailed by:

Friday, April 4, 2025, to:  
Sara Schwartzer  
Intake & Transition Services Manager  
The Kennedy Collective  
2440 Reservoir Avenue  
Trumbull, CT 06611  
sara.schwartzert@thekennedycollective.org

**Project SEARCH Application**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APARTMENT/UNIT #: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

SCHOOL/PROGRAM, if applicable: \_\_\_\_\_ GENDER: \_\_\_\_\_

**RACE/ETHNICITY Pick only one:**  Hispanic or Latino  White (Not Hispanic or Latino)  Black/African American (Not Hispanic or Latino)  Asian (Not Hispanic or Latino)  Native Hawaiian/Other  Pacific Islander (Not Hispanic or Latino)  American Indian/Alaskan Native (Not Hispanic or Latino)

**LIVING SITUATION:** \_\_\_\_\_ (With Parent(s), Guardian, Independent, Group Home, Independent)

**PRIMARY LANGUAGE:** \_\_\_\_\_ **IS INDIVIDUAL OWN GUARDIAN?** YES NO

**PERTINENT SIGNIFICANT CONTACTS: (PARENT, GUARDIAN, SPOUSE, CASE MANAGER, ETC.)**

Name & Organization, if app	Email Address	Relationship
Address	City	State Zip
<input type="checkbox"/> LEGAL GUARDIAN <input type="checkbox"/> EMERGENCY CONTACT <input type="checkbox"/> RECEIVE MAILINGS		
		Phone 1
		Phone 2

Name & Organization, if app	Email Address	Relationship
Address	City	State Zip
<input type="checkbox"/> LEGAL GUARDIAN <input type="checkbox"/> EMERGENCY CONTACT <input type="checkbox"/> RECEIVE MAILINGS		
		Phone 1
		Phone 2

Name & Organization, if app	Email Address	Relationship
Address	City	State Zip
<input type="checkbox"/> LEGAL GUARDIAN <input type="checkbox"/> EMERGENCY CONTACT <input type="checkbox"/> RECEIVE MAILINGS		
		Phone 1
		Phone 2

**All required documents must be completed and in the Steering Committee's possession for the application to be CONSIDERED for entrance into the program:**

**Checklist for completion: Did you include these items?**

- Completed Application
- Resume, if applicable
- Most recent IEP (required for school candidates)
- Most recent IP, LON and LON Summary from the Department of Developmental Services (DDS) (required for adults)
- Evaluations that provide insight into candidate's skills, abilities and interests, if available

**The Kennedy Collective as the Community Resource Provider (CRP) may require additional information not contained within the application for its Intake Services and its electronic case record. This may include but is not limited to:**

- Demographic information
- Medical information including a physical exam
- Applicable consents and release forms

**The Central Connecticut Coast YMCA as the Host Employer requires the following of all employees and interns:**

- Background check
- Fingerprinting
- Child Abuse Prevention Training
- Sexual Harassment in the Workplace Training
- Acknowledgment of Electronic Devices and Social Media Policy
- Acknowledgment of Personnel Policy

**Educational Background:**

Are you 18 years or older?

Yes  No

Do you have a high school diploma or GED?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduation date	
Name of high school attended	

Have you received any additional vocational training?

Yes  No

If yes, list school and certification or degree obtained. \*

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*\*Include Transcript*

When, if any, was the last time you were accompanied by a paraprofessional or job coach?

\_\_\_\_\_ In school

\_\_\_\_\_ In the community

If paired with a paraprofessional or job coach, how often/ how long are you supported by this individual?

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**Work Experience:**

What is your career of interest?

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How do you want to be employed in the community upon completion of Project SEARCH?

Please list any job (paid or volunteer) experience you have had:

Place of Experience: _____ Name of Supervisor: _____ Duties/Responsibilities:	Title: _____ Phone: _____ Date: ____ / ____ / ____ - ____ / ____ / ____ Type of Experience: <input type="checkbox"/> Paid Job <input type="checkbox"/> Internship <input type="checkbox"/> Volunteer
Place of Experience: _____ Name of Supervisor: _____ Duties/Responsibilities:	Title: _____ Phone: _____ Date: ____ / ____ / ____ - ____ / ____ / ____ Type of Experience: <input type="checkbox"/> Paid Job <input type="checkbox"/> Internship <input type="checkbox"/> Volunteer

**Have you ever been fired from a job?**  YES  NO

If yes, please explain:

**Have you ever quit a job?**  YES  NO

If yes, please explain:

**LIST THREE REFERENCES (NON RELATIVES):**

	Name	Relation to you	Phone Number	Email Address
1.				
2.				
3.				

**Current Services:**

**Are you currently receiving services of any of the following agencies? Please check Yes or No:**

- YES       NO      Department of Developmental Services (DDS)  
 YES       NO      Bureau of Rehabilitation Services (BRS)  
 YES       NO      Other Service Provider Not Listed: \_\_\_\_\_

**Providers Name and Contact Information** (phone or e-mail):

DDS: \_\_\_\_\_ Contact: \_\_\_\_\_

Other: \_\_\_\_\_ Contact: \_\_\_\_\_

**Independent Living:**

YES       NO      Are you currently taking any medications?

If yes, please list medication, dosage and time of day to be taken:

Medication	Dosage	Time of day

Do you have any health or medical issues that may impact a successful job placement?

YES       NO

If yes, please explain:

\_\_\_\_\_

\* For the safety of the individual, if a medical condition exists, including a seizure disorder, that might impact the ability to function independently in the work place, we strongly recommend obtaining a medical release from the treating physician for stated condition.

Do you have any limitations that may impact employment?

YES       NO

If yes, please explain:

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Do you have any behaviors that need supported to ensure successful job placement?

YES       NO

If yes, please explain:

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<b>Physical Accommodations</b>	<i>Yes</i>	<i>No</i>	Explanation
I wear glasses.	<input type="checkbox"/>	<input type="checkbox"/>	
I wear contacts.	<input type="checkbox"/>	<input type="checkbox"/>	
I have a hearing impairment.	<input type="checkbox"/>	<input type="checkbox"/>	
I use a hearing aid.	<input type="checkbox"/>	<input type="checkbox"/>	
I use sign language.	<input type="checkbox"/>	<input type="checkbox"/>	
I use a wheelchair, walker or other physical aid.	<input type="checkbox"/>	<input type="checkbox"/>	
I use an assistive speech device.	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Specify)	<input type="checkbox"/>	<input type="checkbox"/>	

## Transportation

How do you plan to get to Project SEARCH?

Have you received travel training? If so, please identify the person or organization who trained you?

Please identify the places/locations you are able to travel to independently using public transportation or walking on foot?

