



Program Application

2023-2024

LSUA SPERO
Office of Academic Affairs
Louisiana State University at Alexandria
Mulder Hall, Room 130
8100 Highway 71 South
Alexandria, LA 71302

Application Instructions

(pages 2-4)

SPERO Student Application Instructions

Applications must be mailed by **April 28, 2023**. You will receive notification by email regarding the receipt and completion of application documents and whether or not you are granted an interview. Interviews will begin around the middle of May. The admissions team will begin scheduling interviews for those who qualify as we receive applications. If selected, the applicant and his or her parents/guardians will be required to attend a two-hour interview on campus. Program acceptance letters will be sent by June 30. Please do not call about the status of an application, as we will not be able to provide this information. A limited number of students are accepted. An interview does not guarantee acceptance into the program.

All information provided by applicants is confidential and will not be shared with any outside agencies unless written agreement is provided by those completing the application. Application information will not be returned or duplicated for any purposes. All data and information gathered during the application and interview process will remain as property of LSUA SPERO and will not be distributed for any purposes.

Admissions Criteria

1. Applicant must be between the ages of 18-28 upon admission to the program.
2. Applicant must have an identified intellectual disability, as defined in 34 CFR § 668.233 - Student eligibility, that interferes with their academic performance.
3. Applicant must have completed high school (with a regular diploma, career diploma, or certificate of achievement) but not be eligible for traditional admission to a college or university.
4. Applicant must have enough emotional stability and self-motivation to attend classes, participate in campus life, and adhere to program policies.
5. Applicant must be independent in handling his or her own medication, specialized dietary needs, and/or medical needs. Note: LSUA SPERO takes no responsibility for specialized diets or medical needs.
6. Applicant must have no current disruptive or aggressive behaviors. Applicants who have a record of past disruptive or aggressive behaviors must submit a clearance letter from a licensed psychologist, psychiatrist, or behavior analyst. The letter must verify that the past behaviors have ceased and will not, as far as can be reasonably ascertained, reoccur during the student's participation in the program. Note: LSUA SPERO does not have personnel available to manage behavioral issues.
7. Applicant should possess basic math/counting skills, including the ability to use a calculator; basic reading and writing skills; and basic computer skills.
8. Applicant should be able to participate in a personal interview without prompting from parent or guardian.
9. Applicant must provide the following documents: Completed Program Application; Copy of State Issued Identification; Copy of High School Exit Document; Copy of Medical Diagnosis; Copy of Individualized Education Plan (IEP) or Educational Evaluation that includes most recent cognitive, adaptive, and achievement scores or Psychological Evaluation that includes cognitive, achievement, and adaptive living scores; and, if applicable, clearance letter from licensed psychologist, psychiatrist, or behavior analyst.
10. Applicant must have the potential to achieve his/her goals within the context of the LSUA SPERO setting.

Application Documents

Please complete all sections of the Application Form (pages 4-13). It is acceptable for the applicant to receive assistance, if needed, in completing the form.

The following items must be submitted with the completed form:

1. Copy of State Issued Identification (must include photograph)
2. Copy of High School Exit Document
3. Copy of Medical Diagnosis or Diagnoses
4. Copy of Individualized Education Plan (IEP) or Educational Evaluation that includes most recent cognitive, adaptive, and achievement scores or Psychological Evaluation that includes cognitive, achievement, and adaptive living scores; and, if applicable, clearance letter from licensed psychologist, psychiatrist, or behavior analyst.

Please **mail** the completed application form, along with the four documents listed above, to the address below by **April 28, 2023**:

LSUA SPERO
Office of Academic Affairs
Louisiana State University at Alexandria
Mulder Hall, Room 130
8100 Highway 71 South
Alexandria, LA 71302

Recommendation Forms

Applicants must also provide three completed Recommendation Forms from individuals who have known the applicant for one year or longer. The individuals must include a past teacher of the applicant, an employment or volunteer supervisor, and a personal contact.

Recommendations must address each of the following:

1. Applicant's Education
2. Applicant's Employment or Community Involvement
3. Applicant's Personal Qualities

Please print three copies of the Recommendation Form and give one copy to each of the individuals who has agreed to complete it. The Recommendation Form is attached to the end of this document (pages 18-20).

Please note that by applying to LSUA SPERO you are waiving your access to the completed Recommendation Forms. The Forms must be either returned with the completed Application Form in sealed envelopes with the evaluator's signature across the flap *or* mailed directly to LSUA SPERO at the address below by **April 28, 2023**:

LSUA SPERO
Louisiana State University at Alexandria
Mulder Hall, Room 364
8100 Highway 71 South
Alexandria, LA 71302

Application Checklist

1. Completed Application Form (pages 6-16)
2. Copy of State Issued Identification (must include photograph)
3. Copy of High School Exit Document
4. Copy of Medical Diagnosis
5. Copy of Individualized Education Plan (IEP) or Educational Evaluation that includes most recent cognitive, adaptive, and achievement scores or Psychological Evaluation that includes cognitive, achievement, and adaptive living scores; and, if applicable, clearance letter from licensed psychologist, psychiatrist, or behavior analyst.
6. Three Completed Recommendation Forms (pages 18-20)

All application documents should be mailed to the following address

LSUA SPERO
Louisiana State University at Alexandria
Mulder Hall, Room 364
8100 Highway 71 South
Alexandria, LA 71302

Once your completed application has been received, you will be notified of receipt by email. Application information will not be returned. Note: Applications will not be considered until ALL requested information is received. The application can be typed and/or printed neatly.

Application Form

(pages 6-16)

Release and Exchange of Information

LSUA SPERO staff may need to obtain additional information about you from school districts and personnel. In addition, staff may also exchange personal information about you with LSUA faculty and staff in order to provide and enhance educational opportunities for you. This exchange will occur only with your written permission, as given below, and with the understanding information will only be shared for the purpose of accommodation and academic progress.

I (name), _____

give permission to exchange information about me with the offices/individuals indicated

below:

1. School Districts
2. School Personnel
3. Department of Vocational Rehabilitation Office
4. Department of Disability and Special Needs Office
5. Admissions Office
6. Student Affairs
7. Course Instructors
8. Financial Aid Office
9. University Police
10. Health Center
11. Counseling Services
12. Parents/Guardians
13. Registrar's Office
14. Mentor
15. Other

Applicant Signature: _____

Date: _____

Applicant Information

Name:		
Date of Birth:	SSN*:	Applicant's Phone Number:
Address:		
City:	State:	ZIP Code:
Applicant's Email Address:		

*Your SSN is confidential and will not be disclosed to unauthorized parties.

Student receives support from the following: (please check all that apply)

- Vocational Rehabilitation Services
- Occupational or Physical Therapy
- Speech Therapy
- Supplemental Security Income
- Division of Developmental Disabilities
- Counseling Services
- Speech/Hearing Services
- Medical Assistance
- Other:

Student Legal Information (check that which applies):

- Minor
- Competent Major
- Interdicted
- Representation and Mandate (formerly known as Power of Attorney)
- Continuing Tutorship
- Other:

Student lives with: _____

Parent/Guardian Information		
Name:		
Address:		
City:	State:	ZIP Code:
Email Address:		
Occupation/Employer:		
Cell Phone:	Home Phone:	Work Phone:
Father/Guardian		
Name:		
Address:		
City:	State:	ZIP Code:
Email Address:		
Occupation/Employer:		
Cell Phone:	Home Phone:	Work Phone:
Sibling's Information		
Name:		Age:
Emergency Contact #1		
Name:		Relationship:
Emergency Contact #2		
Name:		Relationship:

Medical History

Note: Students must be independent in administering medication.

Please give brief description of your medical history including disability diagnosis:

Please list any significant medical or physical conditions which may affect your participation in academic and recreational University activities:

Please list *all* medications taken and their purpose:

Please detail any other medical information you consider would be important regarding your participation in LSUA SPERO:

Educational History

School	City, State	Years Attended	Reason for Leaving

1. Did/will you receive a certificate or diploma from your high school? Yes No

2. Name of certificate received:

3. Date Received:

4. Received from:

5. In a few words, please describe your academic strengths and weaknesses:

6. Have you participated in English, Science, Math, and Social Studies classes at your school? Yes No

Employment History

Paid Work Experience			
Employer Contact Information	Responsibilities	Employment Dates	Reason for Leaving

Volunteer Work Experience			
Employer Contact Information	Responsibilities	Employment Dates	Reason for Leaving

What type of work do you enjoy?

Personal Support Inventory

Completed by (parent/guardian): _____

<i>Academic Skills</i>	<i>Needs Complete Assistance</i>	<i>Needs Much Assistance</i>	<i>Needs Little Assistance</i>	<i>Completely Independent</i>
Understanding the value of money				
Handles money to make purchases				
Counting bills, change				
Staying within a budget				
Using a computer for word processing				
Navigating the Internet				
Following verbal directions				
Following written directions				
Keeping up with due dates and assignments				
Studying given information				
<i>Independent Living Skills</i>	<i>Needs Complete Assistance</i>	<i>Needs Much Assistance</i>	<i>Needs Little Assistance</i>	<i>Completely Independent</i>
Finding way around a new environment				
Following a schedule				
Managing personal belongings				
Ordering and purchasing from a restaurant				
Finding items in a store				
Taking public transportation				
Use of good judgment skills in an emergency				
Adjusting to new situations or environments				
Caring for personal hygiene and grooming needs				
<i>Social Skills & Communication</i>	<i>Needs Complete Assistance</i>	<i>Needs Much Assistance</i>	<i>Needs Little Assistance</i>	<i>Completely Independent</i>
Communicating needs appropriately				
Asking for help or clarification				
Dealing with conflict				
Distinguishing between friends and strangers				
Interacting appropriately with peers				
Respecting authority figures				
Using cell phones				
Verbalizing and/or writing personal information				

Writing Skills (Check all that apply)		
<input type="checkbox"/> No functional reading	<input type="checkbox"/> Writes name	<input type="checkbox"/> Writes/copies all letters
<input type="checkbox"/> Writes complete words	<input type="checkbox"/> Writes short sentences	<input type="checkbox"/> Correctly uses punctuation
<input type="checkbox"/> Drafts, Edits, revises		
Reading and Comprehension Skills (Check all that apply)		
<input type="checkbox"/> No functional reading	<input type="checkbox"/> Identifies letters	<input type="checkbox"/> Recognizes familiar words
<input type="checkbox"/> Reads short stories	<input type="checkbox"/> Reads chapter books	<input type="checkbox"/> Reads books silently
<input type="checkbox"/> Recall/comprehend any of the above:		
Reading Grade Level		
Math Skills (Check all that apply)		
<input type="checkbox"/> No functional mathematics skills		
<input type="checkbox"/> Solves simple programs with calculator		
<input type="checkbox"/> Solves simple addition programs without calculator		
<input type="checkbox"/> Solves simple subtraction problems without calculator		
<input type="checkbox"/> Solves simple multiplication problems without calculator		
<input type="checkbox"/> Solves simple division problems without calculator		

Has the applicant used assistive technology (voice recorder, cell phones, talk to text, etc.)?

Yes No

If yes, what technology has the application used? _____

What words would you use to describe the applicant? How would you describe the applicant's personality?

What do you consider are the applicant's strengths and challenges socially?

What do you consider are the applicant's strengths and challenges academically?

Student Questionnaire

This section is to be hand-written by applicant and may include additional pages. Please indicate if a scribe is used.

Why do you want to be considered for LSUA SPERO?

Describe what skills you would like to learn in each of the following areas:

Daily Living:

Social:

Employment:

Academics:

What kind of jobs are you interested in after you leave high school or college?

What do you like to do in your free time?

What is your favorite music or singer?

Do you spend time with friends outside of school? Yes No

If yes, what do you like to do with your friends?

Recommendation Form

(pages 18-20)

Recommendation Form

Recommendation for (applicant's name): _____

The individual named is applying for admission to LSUA SPERO, a postsecondary transition program for students with identified developmental disabilities.

The program is open to young people between the ages of 18 and 28 who have an identified developmental disability; who have completed high school with a high-school diploma, career diploma, or equivalent; and are ineligible for regular college admission. Students enrolled in the program “audit” some college-level classes; take special program classes designed to improve their daily living skills, interpersonal skills, and employment skills; participate in on-campus events and activities; and receive vocational training either on campus or at approved off-campus venues. Program students will work with and be assisted by student mentors both during and outside of class time. Students who complete the program will receive help in finding useful employment in the CENLA area.

Students considered for admission to the program should have a desire to continue their educational journey and become more independent and possess the emotional maturity needed to successfully attend classes, work, and social events on a college campus.

Please keep the above information in mind as you complete the Recommendation Form. Attach any additional pages as needed. Once completed, return the recommendation form to the applicant in a sealed envelope with your signature across the flap. The applicant has agreed to waive their access to your recommendation as part of the application process. If you have any questions, please contact LSUA SPERO at ehalpin@lsua.edu.

Name		
Address:		
City	State:	Zip Code:
Organization:	Relationship:	
Email:	Phone Number:	

Student Recommendation Form

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

Please describe whether you think the applicant would benefit from enrollment in the LSUA SPERO program and why.

Please estimate whether the parent/guardian/family of this applicant will support the philosophy and goals of the LSUA SPERO program? Unlikely Likely Quite Likely Very Likely

Please describe the strengths and challenges of the applicant and how you think they might impact his or her participation in the LSUA SPERO program?

Please complete the following inventory to the best of your ability. For areas unrelated to your knowledge of the student, please mark the N/A column.

<i>Academic Skills</i>	<i>Needs Complete Assistance</i>	<i>Needs Much Assistance</i>	<i>Needs Little Assistance</i>	<i>Completely Independent</i>	<i>N/A</i>
Understanding the value of money					
Handles money to make purchases					
Counting bills, change					
Staying within a budget					
Using a computer for word processing					
Navigating the Internet					
Following verbal directions					
Following written directions					
Keeping up with due dates and assignments					
Studying given information					
<i>Independent Living Skills</i>	<i>Needs Complete Assistance</i>	<i>Needs Much Assistance</i>	<i>Needs Little Assistance</i>	<i>Completely Independent</i>	<i>N/A</i>
Finding way around a new environment					
Following a schedule					
Managing personal belongings					
Ordering and purchasing from a restaurant					
Finding items in a store					
Taking public transportation					
Use of good judgment skills in an emergency					
Adjusting to new situations or environments					
Caring for personal hygiene and grooming needs					
<i>Social Skills & Communication</i>	<i>Needs Complete Assistance</i>	<i>Needs Much Assistance</i>	<i>Needs Little Assistance</i>	<i>Completely Independent</i>	<i>N/A</i>
Communicating needs appropriately					
Asking for help or clarification					
Dealing with conflict					
Distinguishing between friends and strangers					
Interacting appropriately with peers					
Respecting authority figures					
Using cell phones					
Verbalizing and/or writing personal information					