



Transition to Life Camp  
2018 Student Application  
July 8, 2016- August 2016

Please complete the application and return to your OOD/BSVI counselor no later than February 16<sup>th</sup>, 2018. Counselors please have completed applications submitted to Tamara Fisher at OSSB by February 23, 2018 for consideration of acceptance into the program.

General Information:

Student Name:

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Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Address:

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Phone Number:

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Parent/Guardian Name:

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School District:

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BSVI Information:

BSVI Coordinator Name:

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BSVI Office Location:

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BSVI Contact Number:

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School Information:

Are you a high school graduate? YES or NO

If yes, when was your graduation date?

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When do you plan to graduate?

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What related services are you presently receiving?

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Do you use adapted equipment and if so what type?

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Please list accommodations you will need to be successful in school or on a job site; including all technology.

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If a Braille reader, what level do you read?

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### Secondary Concerns:

Please list any secondary diagnosis listed on your current IEP that will assist the Summer Work and Learn staff in making appropriate decisions regarding your individualized programming.

Secondary Diagnosis:

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If you receive support from your county board of DD please list contact information below:

Counselor Name:

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Counselor Phone Number:

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Vocational Area of Interest:

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Please check the above box to indicate and understanding of the following statement:

The Ohio State School for the Blind will work very hard to find a summer vocational site in my interest area. I understand this internship will be an entry-level position and may not be my long-term dream job.

If you have any questions after reading this application please contact [Tamara Fisher](#) at the Ohio State School for the Blind at [614-468-8894](tel:614-468-8894) or [tfisher@ossb.oh.gov](mailto:tfisher@ossb.oh.gov)

Thank you for your interest in Transition to Life Camp 2018.