



Applying for JUMP START

There are three steps to applying for participation in JUMP START:

1. Fill out the application.

- Applicants *must* have a diagnosis of Autism Spectrum Disorder (or Asperger's) and be a rising senior in a regular education high school curriculum.
- An application to become a participant of IGNITE's JUMP START summer program is attached. If you are interested in applying, the first step is to fill out the application and e-mail it to: ignite_davidson@autismsociety-nc.org or mail it to: Mindy Govan, Director; IGNITE; 209 Delburg Street, Suite 134; Davidson, NC 28036
- If you have questions about filling out the application, you can ask a parent or someone who knows you well to help you, or leave some questions blank and when you come for the interview we can fill it out together.
- There are limited slots for participation in JUMP START. We will contact you *by email* to confirm that your application has been received and provide you with follow-up information.

2. Come for an interview:

- You will be contacted via email to set up an interview to allow us to meet with you and your parents. This meeting is important for us to learn more about you and for you to be able to ask us questions about IGNITE and the program we offer.
- Parents or caregivers are required to come to the interview if you are under 18 years old.

3. What happens next?

- JUMP START looks for participants who want to learn to be more independent, have the ability to learn in a group setting, have independence skills, and a desire to advance their lives and future.
- There are a limited number of spots, therefore, acceptance to JUMP START will be decided by the director and staff of IGNITE.
- Please email Mindy Govan, Director, or Alicia DiDomizio, Asst. Director, if you have questions, ignite_davidson@autismsociety-nc.org

Thank you for your interest in JUMP START!

IGNITE staff only

Date Rec'd App: _____

Forms Rec'd: _____

Notified: _____

Accepted: _____



Summer Application

Date: _____

Parents:

Name(s): _____

Address: _____

Parent 1: Phone: _____ Cell Phone: _____ E-mail: _____

Parent 2: Phone: _____ Cell Phone: _____ E-mail: _____

About You:

Legal Name (applicant): _____

Preferred Name (or nickname): _____

Current Address: _____

Applicant Home Phone: () _____ **Applicant** Cell Phone: () _____

Applicant E-mail Address: _____

Date of Birth: _____ Age: _____ Sex: _____

Diagnosis (required): _____ (Attach most recent diagnostic evaluation)

How old were you (approx.)? _____

What doctor provided the diagnosis (i.e. psychologist, pediatrician) _____

Other medical conditions: _____

Medications and/or allergies: _____

Medication that will need to be taken during Jump Start: _____

Any other medical emergency issues we should be aware of: _____

Emergency Contact Person (if different than parent/guardian)

Name: _____ Phone: _____ Other Phone: _____

Their relationship to you: _____

Transportation

Do you drive? __ yes __ no

If not, do you have reliable transportation to IGNITE? Please describe mode of transportation (including all potential drivers): _____

Education

What is the name of the high school you are attending? _____

What grade will you complete in June? _____

What degree and major (or certification) would you be interested in pursuing if you decide to attend college?

Have you applied for colleges yet? _____

Employment

Are you currently working or volunteering? ____ Yes ____ No

If Yes:

What is the position / job title? _____

What is the name of the company / business? _____

Is it paid or volunteer work? _____

What type of job would you like to have? _____

Why are you applying to the IGNITE summer program? Check all that apply:

I want to meet new people and make new friends.

I want to learn new things and strengthen certain skills.

I want to explore or prepare for a career or college.

I want to have a place to go because I get bored at home.

I want to be more self-sufficient and not depend so much on others.

I want to prepare to live on my own.

My parents want me to attend

Other reasons: _____

What do you like to do in your free time? _____

Do you have friends that you get together with after school or on the weekends? _____

What do you do together? _____

Is there anything else you would like us to know about you? _____

Signature



For Parents to Know:

IGNITE is a one of a kind, unique community center for young adults with a diagnosis of high functioning autism or Asperger's Syndrome. To take part in IGNITE's summer program, the young adult must fill out an application, attend an interview, and then be accepted as a participant. Considerations for acceptance as a participant will be determined by the IGNITE staff based upon factors including desire to participate, ability to attend on a regular basis, and level of social interest and level of independence skills (i.e. can pay for purchases with cash or ATM, walk independently in the community, etc.). We do not accept anyone with aggression, anger or untreated mental health issues, as we cannot provide one-to-one assistance.

A primary function of IGNITE is to provide a place where members feel comfortable to share ideas, practice skills and be themselves. Having a say in one's own life fosters self-confidence, independence, and a sense of autonomy that are important to developing a 'sense of self'. We hope that through participation in Jump Start this summer, we can introduce your son/daughter to an optional adult program for after high school and provide them with the opportunity to meet other high school students.

We hope that if connections between members are positive and friendships are made, that parents will support opportunities for those individuals to get together outside of program time. If you would like suggestions in arranging for activities between individual participants, please talk to the staff.

If you have additional questions, you are welcome to contact the director. We hope your child enjoys being a participant of IGNITE's summer program, JUMP START.

Sincerely,

Mindy Govan
IGNITE Director



Davidson Cotton Mill, 209 Delburg Street, Suite 134, Davidson, NC 28036

704-897-8982

Website: www.ignite-davidson.org Email: ignite_davidson@autismsociety-nc.org