

OLS-Venture Recommendation Form For:



Applicant Name: _____

Date: _____

The above-named individual has applied for admission to Bellevue College's Occupational and Life Skills (OLS)-Venture, an associate degree program designed for postsecondary highly motivated adults with mild developmental delays. This degree prepares students to become self-determined, responsible citizens. Students develop a career pathway, interpersonal skills, and participate in related internship experiences. Admission information is available at www.bellevuecollege.edu/ols.

Please fill out all items on this application. Use additional pages if more writing space is needed. Your answers will help us determine the applicant's suitability for OLS-Venture and will help us better serve the student if accepted for admission.

Please mail the completed form to: **Bellevue College, OLS-Venture, 3000 Landerholm Circle, Bellevue, WA 98007-6484.** For more information or additional forms please inquire at ols-venture@bellevuecollege.edu 425.564.2844 or visit www.bellevuecollege.edu/ols. Fax: 425.564.3094

PLEASE TYPE OR PRINT LEGIBLY

Your Name _____

Address _____

Street

Apt. #

City _____ State _____ Country _____ Zip _____

Organization _____ Phone (w/area code) _____ e-mail _____

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

Are there any limitations that would prevent this applicant from being involved in physical activities essential to her/his vocational training goals? Yes No

Comments: _____

How likely is it that the parents/guardians of this candidate will support the philosophy and goals of OLS-Venture?

Unlikely Quite Likely Highly Likely

Comments: _____



Bellevue College reaffirms its policy of equal opportunity regardless of race, color, creed, religion, national origin, sex, sexual orientation, age, marital status, disability, or status as a disabled veteran or Vietnam era veteran. Please visit <http://www.bellevuecollege.edu/equal.asp>.

Please rate the applicant on the following characteristics on a scale of one to five (with one being the lowest and five being the highest). Enter ratings ONLY under the categories to which you feel qualified to respond.

Examples:	School	Job	Home/Leisure
Initiative	<u>4</u>	<u>3</u>	<u>N/A</u>
Motivation	<u>3</u>	<u>4</u>	<u>N/A</u>

GENERAL	School	Job	Home/Leisure
• Initiative	_____	_____	_____
• Motivation	_____	_____	_____
• Reliability	_____	_____	_____
• Perseverance	_____	_____	_____
• General Attitude	_____	_____	_____

Comments: _____

INTERPERSONAL	School	Job	Home/Leisure
Ability to relate to:			
• Peers with LD	_____	_____	_____
• Peers without LD	_____	_____	_____
• Teachers	_____	_____	_____
• Work supervisors	_____	_____	_____
• Young children	_____	_____	_____
• Elderly people	_____	_____	_____
• People w/disabilities	_____	_____	_____

Comments on style of interaction and specific strengths and weaknesses in social situations:

JUDGMENT/DECISION-MAKING			
Ability to:	School	Job	Home/Leisure
• Make everyday decisions using good judgment	_____	_____	_____
• Act in an emergency using good judgment	_____	_____	_____
• Use people as resources (asking for help when necessary, asking questions/clarification when appropriate)	_____	_____	_____

Comments: (Use examples, if possible.) _____

EMOTIONAL ADAPTABILITY

School Job Home/Leisure

Ability to:

- Cope with stress _____ _____ _____
- Adjust well to new situations _____ _____ _____
- Separate own problems from problems of others (avoid taking everything personally) _____ _____ _____

Comments: (Be specific: what types of situations does the applicant find stressful? What coping mechanisms are used?) _____

TIME MANAGEMENT & ORGANIZATION

Ability to: School Job Home/Leisure

- Attend to daily schedule (on time, etc.) _____ _____ _____
- Plan and carry out activities _____ _____ _____
- Prioritize _____ _____ _____
- Keep track of belongings _____ _____ _____

Comments: (Be specific about the nature of any difficulties and the kind of supervision required to cope.) _____

Please describe the applicant’s learning style, including how he/she approaches tasks and compensates for her/his learning disabilities. _____

FOR EMPLOYER/VOCATIONAL TRAINERS ONLY

(Educators, skip to “educators only” section and then sign below)

Please describe the nature of the work setting in which you observed the applicant (e.g., daycare center, hospital, retail establishment, etc.).

Please describe specific tasks performed by the applicant; whether the job was a paid or volunteer position; hours/week worked.

What were the applicant's strengths and weaknesses on the job?

FOR EDUCATORS ONLY

Please describe the applicant's academic strengths and weaknesses.

Signature

Date