

UCP & Backus Hospital Project SEARCH

Intern Application for Project SEARCH

This is not an application for employment. Completing this application does not guarantee employment with Hartford Healthcare. Information included in this application will not be shared with Hartford Healthcare Department Supervisors.

This is an application for participation in Project SEARCH, a unique transition program held at Backus Hospital, the program Host Business.

September 2025 Cohort

- Completed Applications must be returned within 2 weeks of tour/visit, to UCP of Eastern CT, to be considered for Project SEARCH
- Prospective Interns will be invited to the Skills Assessment and Interview Day which will be scheduled for Spring of 2025.
- Program Starts: September 2025

Purpose

This application packet aims to gather information for the Selection Committee's evaluation of your eligibility as a Project SEARCH Intern. Project SEARCH stands out as a distinct program from traditional pre-employment initiatives. It incorporates both classroom learning, where interns engage with employability curriculum, and an intensive, full-time, unpaid internship in a business setting. Throughout this internship year, interns practice skills directly in the workplace environment. The ultimate goal is for interns to transition to full-time, competitive employment, with a minimum commitment of 16 hours per week. Family involvement is integral to the success of Project SEARCH, as they play a crucial role in supporting their adult child's learning and skill development for competitive employment. This

application facilitates the Selection Committee's assessment of each intern candidate's skills, abilities, and background. The Selection Committee, comprising representatives from the Steering Committee, the business site, and UCP, may contact parents, candidates, case managers, school staff, and/or employers for additional information.

Selection Process Guidelines

1. Application should be sent:

By Mail:

Christine Olbrys, UCP Associate Executive Director
 UCP of Eastern CT
 42 Norwich Road
 Quaker Hill, CT 06375
 860-443-3800 ext 125

By Email:

colbrys@ucpect.org

2. Completing this application does not guarantee acceptance.
3. The Selection Committee will only accept fully completed applications, including all documents referenced on page 9. Any incomplete application will be disregarded.
4. If accepted and if a student is still under the purview of public schools, an IEP may be developed with the school IEP team. This is entirely the decision of the IEP team, not UCP or the business site.
5. The Selection Committee will check references in this application and based on the information provided, will invite qualified applicants to Assessment Day.
6. On Assessment Day, held in Spring 2025 (exact date to be determined), applicants and a family representative will meet the Project SEARCH team and undergo several "skill assessments" as well as a mock interview.
7. As soon as possible after Assessment Day, applicants will be notified of whether they will be invited to join Project SEARCH.
8. If accepted, the intern must be able to pass a criminal background check, a TB screening, and verify updated vaccines including MMR, Varicella, and Influenza. If vaccinated against COVID, the intern must show proof of vaccination.

Project SEARCH Selection Criteria

An eligible Project SEARCH candidate must:

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Have you ever been fired from a job or removed from a community employment training Program?

Y N

If yes, please explain

Have you ever quit a job?

Y N

If yes, please explain

Transportation

Self-reliance and independence are program outcome goals for Project SEARCH interns. How do you plan to get to Project SEARCH?

- ADA (white/blue transit van)
 Public Transportation
 Family
 Other _____ (please be specific)

Do you currently use ADA or Public Transportation independently? Yes No

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

Please provide a description of where you are able to travel to using public transportation or your own two feet:

Service Agencies

Do you have a Vocational Rehabilitation Counselor from the Department of Rehabilitation Services (DORS)? Yes No

Name _____ Phone _____ Town _____

Do you have a Transition Advisor or Case Manager from the Department of Developmental Services (DDS)? Yes No

Name _____ Phone _____ Town _____

DDS # _____

Do you have Husky C? Yes No

Are you currently enrolled in CT Department of Developmental Services Yes No

Support Needs

Check areas below which challenge you. Please indicate below any areas that present challenges for you in securing employment. We recognize that every candidate may encounter obstacles, and we encourage parents or staff to assist in completing this section, if needed.

<input type="checkbox"/> Mobility	<input type="checkbox"/> Decision making
<input type="checkbox"/> Reading	<input type="checkbox"/> Self-care
<input type="checkbox"/> Attending to tasks	<input type="checkbox"/> Adjusting to new situations
<input type="checkbox"/> Speech/language	<input type="checkbox"/> Taking medication
<input type="checkbox"/> Hyperactivity	<input type="checkbox"/> Theft
<input type="checkbox"/> Handling money	<input type="checkbox"/> Taking direction
<input type="checkbox"/> Harming self or others	<input type="checkbox"/> Work stamina (standing, stairs, lifting)
<input type="checkbox"/> Communicating/working with others	<input type="checkbox"/> Inappropriate sexual behaviors
<input type="checkbox"/> Attendance	<input type="checkbox"/> Hygiene and grooming

Will you need to take medications during the Project SEARCH day?

Yes No

Are you able to administer your own medications during the Project SEARCH day?

Yes No

List any health or medical issues that may impact a successful job placement:

Please list any other challenges or limitations that may impact a successful job placement:

Please list accommodations needed on site:

Intern Response Question

Why do you want to participate in Project SEARCH? (Please state in your own words and/or have the person assisting write the responses in the Candidate's own words.)

References

List three references who are NOT family.

Reference Name _____
Relationship to Candidate _____
Phone Number _____ Email Address _____

Reference Name _____
Relationship to Candidate _____
Phone Number _____ Email Address _____

Reference Name _____
Relationship to Candidate _____
Phone Number _____ Email Address _____

Assistance to complete application

The person assisting the student to complete this application is:

Name _____

Title _____

Organization _____

Phone Number _____

Email Address _____

Signature

Date

Parent/Intern Information

1. UNIVERSAL RELEASE: I give permission for my/ the intern's educational/employment records concerning to be transferred from his or her school/placement to UCP and Project SEARCH Partners (Backus Hospital).
2. PHOTOGRAPHY RELEASE: I also give my consent to have UCP take and use photographs or video and/or interview me/the intern for publicity, educational, marketing, advertising and fundraising purposes through internal publication, external publication, radio, television, video or internet.
3. A two-week trial period will be required of all candidates who are accepted into Project SEARCH. The parent and candidate agree to comply with this procedure.

Intern Signature

Date

Parent/Guardian Signature (if needed)

Date

Project SEARCH Intern Contract

This attestation is here so that the intern and family understand the commitment required to participate in Project SEARCH.

I, _____, understand that if I am accepted into the Project SEARCH program and must abide by the following terms and conditions:

- I will complete at least three unpaid job internships at the host site.
- I will attend the program every day from 9:00 am- 3:00 pm (subject to change), Monday through Friday.
- I will dress appropriately and wear required attire.
- I will call my instructor and departmental supervisors when I am absent or tardy.
- I will make up any assignments missed due to excused absences.

- I will follow all the rules established by the program at the host site.
- I will attend regularly scheduled meetings with my Project SEARCH staff, case manager, parents, teachers, and business staff.
- I will be an active participant and communicate any issues at our meetings.
- I will actively pursue competitive employment, a minimum of 16 hours per week.
- I understand that I need to attend the Project SEARCH Skills Assessment Day

I have read the above terms and conditions and agree to accept my placement in the Project SEARCH program. I understand that I may be asked to leave Project SEARCH if I fail to follow the terms and conditions.

Intern Signature

Date

In addition to submitting this completed application, please include where applicable a copy of

- The most recent IEP, IP/LON from DDS or similar agency, as applicable
- Evaluations that have bearing on Candidate's ability to achieve competitive employment (minimum of 16 hours per week)
- Attendance Record – (Less than 10 unexcused absences in a calendar year (recommended))
- Discipline Record – (No more than 3 serious discipline referrals in a calendar year)
- Career Assessment, if available
- Copy of CT State Identification or Driver's License
- Copy of Guardianship Decree for intern (if applicable)
- Copy of current resume

Intern Signature

Date

Parent/Guardian Signature

Date