



## Career Exploration Program

### Application

The purpose of the Career Exploration program is to equip youth with special needs 16-21 in area high schools with **real world work internship** during the school week, with desired goals to:

- 1) Equip youth with work skills within their scope of interest, or a range of interests, readying participants for future employment;
- 2) Help youth envision their future post-high school, thereby reducing stress and anxiety;
- 3) Surround youth with peers who have already successfully exited school, are employed, and can provide “peer to peer” influence and coaching;
- 4) Discover authentic work interests in a safe environment, thereby increasing confidence rather than experience a failed “going in cold” job placement;
- 5) Fastrack youth to transition out of high school at the end of the current school year, or within a year of starting the CEP.

Currently, the program operates out of the Arc campus, and provides experiential opportunities in landscaping management, commercial laundry services, and janitorial. Based on agreement with the referring school and the applicant’s IEP, as applicable, we want to broaden that scope of interest to include community employment sites, using our employment network and friends of the Arc.

#### Eligibility

**Currently in School:** Youth with special needs currently enrolled in high school special education services are eligible for the Arc of Hilo Career Exploration program. We anticipate that applicants will be between the ages of 16-21.

**Out-of-School:** We also recognize that we may have applicants who have already matriculated, especially during the pandemic, where they have not been able to participate in a transition program, or provided career planning services leading to employment placement. *The CEP will consider acceptance of these applicants in an unpaid internship through the CEP on a case by case basis, with the expectation that we will try to help them transition to an employment placement, whether through our own employment openings on our commercial crews, or in the community through job development, assuming authorization under the Medicaid waiver, if the individual is eligible.*

#### Unpaid Internship

The applicant and their guardian understand that the CEP program is an **unpaid internship**, and does not replace work that the Arc of Hilo would otherwise need to employ individuals.

### Program Funding

The CEP is not funded through any public entitlements. We are thankful for our new sponsors Matson Navigation and Ohana Fuels for initial funding for the 2021 school year. We are also awaiting funding through the Hawaii Community Foundation, for which we submitted grants. As the program grows, we will seek additional corporate, private and foundation funding to help support this vital program.

### Contact:

Please contact Robert Efford, CEO of the Arc of Hilo for further information.

Robert Efford  
509-370-8991  
1099 Waiuanue Avenue  
Hilo, HI 96720





## **Career Exploration Program Application**

### **Applicant's Information**

Date \_\_\_\_\_

Applicant's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Gender M\_\_\_ F\_\_\_ Non-Binary \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

### **Parent or Legal Guardian**

Name \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

### **High School Information**

*Please include with your application a copy of your most recent IEP and any diagnostic information that may have been completed during high school by a trained healthcare professional.*

High School \_\_\_\_\_ High School Teacher/Contact Information \_\_\_\_\_

Special Education Yes / No When do you expect to graduate High School? \_\_\_\_\_

Have you participated in a Transition Program? Yes / No If Yes, where \_\_\_\_\_

### **Employment Information**

Do you have any paid or unpaid work experience?

\_\_\_\_\_  
\_\_\_\_\_

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**Health Status**

As our foremost priority is your health and safety, please provide information on any health condition(s) that we should be aware of, and any protocols provided by your medical professional on how to support your health condition, within our ability to do so:

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By signing below, you allow the Arc of Hilo to review the applicant's health record to ensure that we can safely provide services, and follow up with the applicant's physician as needed with regards to protocols. *Please note: We cannot dispense medications. Participants must be able to take their own medications independently, and without prompting.*

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The below questions relate to our understanding of eligibility for state and federal services authorization related to job development, supported employment and other services. We can help you potentially access, or appeal denial of these services, if you are currently not authorized, based on eligibility.

**Medicaid Eligibility**

Have you ever applied for Medicaid waiver services through the Department of Health, Developmental Disabilities Division? Yes/No If Yes, what was the outcome? \_\_\_\_\_

**Department of Vocational Rehabilitation (DVR)**

Have you ever applied for vocational services through the Department of Vocational Rehabilitation? Yes/No If Yes, what was the outcome? \_\_\_\_\_

**Social Security (SSI)**

Do you currently receive Social Security benefits? Yes/No

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**Applicant's and Parent/Guardian Signatures**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please return completed signature along with the requested information above to the attention of CEP Coordinator, Arc of Hilo, 1099 Waianuenue Ave, Hilo, HI 96720 or via scanned email to [sfigueroa@hiloarc.org](mailto:sfigueroa@hiloarc.org)*