

# Connecticut State Department of Education

## Transition-Only Services for Students with Disabilities (18-21) SURVEY

Date Submitted:

**Program Type:** Please check ONE box to indicate the type of transition program for which you are completing this survey. Descriptions of these program categories can be found at the end of the survey.\*

- Public Transition Program (PTP)** [Public – located in a district high school, on a high school campus, on a college/university campus, or in a community location]  
**Please Note:** Public School-Based Transition Programs (PSBTPs) and Transition Community-Based Programs (TCBPs) have been collapsed into one CT Transition Program category – PTPs.
- Transition/Vocational Service Provider (TVSP)** [Non-public – must hold a current/valid contract as a vendor for the CT Department of Aging and Disability Services (ADS) or the CT Department of Developmental Services (DDS)]

Program Name:

Site Location Name:

Site Address:

Site Address: This should be the home-base address from which the transition/vocational services are provided; not each community work-site. However, please complete one form for each separate program location or base of operation.

Primary Contact Person Name:

Organization or District:

Mailing Address:

Phone Number:

Fax Number:

E-mail:

Web Site:

**Region:**  ACES  CES  CREC  LEARN  N/A  
 EASTCONN  ED ADVANCE

**Town Served:**

Serves students only in your district/RESC:  Yes  No  N/A [TVSP only]

Open to qualified students from other districts on tuition, space-available basis:  Yes  No  N/A

**Students Served (check all that apply):**

Grades served:  9  10  11  12+ / Ages 18-21

Do you specialize in working with students with a specific disability?  Yes  No

If yes, please specify (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Autism                        | <input type="checkbox"/> OHI - ADD/ADHD                                |
| <input type="checkbox"/> Deaf-Blindness                | <input type="checkbox"/> Specific Learning Disability/Dyslexia (SLD/D) |
| <input type="checkbox"/> Deaf or Hard of Hearing       | <input type="checkbox"/> Orthopedic Impairment                         |
| <input type="checkbox"/> Emotional Disturbance (ED)    | <input type="checkbox"/> Speech or Language Impairment                 |
| <input type="checkbox"/> Intellectual Disability (ID)  | <input type="checkbox"/> Traumatic Brain Injury (TBI)                  |
| <input type="checkbox"/> Multiple Disabilities         | <input type="checkbox"/> Visual Impairment                             |
| <input type="checkbox"/> OHI - Other Health Impairment |  |

Other (s) – please specify:

**Services Offered (Check all that apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> College Classes for Credit  | <input type="checkbox"/> Mobility Training                       |
| <input type="checkbox"/> College Classes not for Credit (audit/non-credit courses)               | <input type="checkbox"/> Occupational/Physical Therapy           |
| <input type="checkbox"/> Community-based career exploration opportunities                        | <input type="checkbox"/> Paid employment - minimum wage or above |
| <input type="checkbox"/> Community-based Independent Living Skills assessment                    | <input type="checkbox"/> Paid employment - stipend               |
| <input type="checkbox"/> Community-based Independent Living Skills training                      | <input type="checkbox"/> Recreation/leisure programs             |
| <input type="checkbox"/> Community-based vocational assessment                                   | <input type="checkbox"/> Group-supported employment              |
| <input type="checkbox"/> Functional academics (not earning credits toward a high school diploma) | <input type="checkbox"/> Residential programs                    |
| <input type="checkbox"/> Job coaching services   | <input type="checkbox"/> Respite care                            |
| <input type="checkbox"/> Job development   | <input type="checkbox"/> Social skills training                  |
| <input type="checkbox"/> Job placement   | <input type="checkbox"/> Transportation training                 |
| <input type="checkbox"/> Mentors   | <input type="checkbox"/> Volunteer experience/community service  |

Other(s) – please specify:

**Time with Non-Disabled Peers (TWNDP) ([See the 9-9-2015 TWNDP Memo for guidance](#)):**

Percentage of time that students with disabilities are integrated with non-disabled peers in transition services activities:

- 80% to 100%  
 40% to 79%  
 0% to 39%

Brief description of key transition service components:

Number of Students Served Annually:

Site hours of Operation:

Number of days operating per week:

Services offered for:

- 10 months       12 months       Extended School Year (ESY)

If you are a TVSP the Agency/Organization is a current and valid vendor of:

CT Department of Aging and Disability Services (ADS)

CT Department of Developmental Services (DDS)

Contract valid through (DD/MM/YYYY):

This survey was completed by:

Name:

Title:

Phone:

E-mail:

If you have questions about completing this form, please contact:

**Jay Brown, Education Consultant**

CT State Department of Education, Bureau of Special Education

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**\*Description of CT Transition Programs Offering Transition-Only Services to Students With Disabilities (18-21):**

**1. Public Transition Program (PTP)**

**Please Note:** Public School-Based Transition Programs (PSBTPs) and Transition Community-Based Programs (TCBPs) have been collapsed into one CT Transition Program category – PTPs.

In order to be **recognized** by the Connecticut State Department of Education (CSDE), Bureau of Special Education (BSE) as a PTP and included in the CT Transition Programs list on EdSight, **ALL** of the following required criteria must be met by each organization:

1. A transition program operated by a public school district/RESC (governed by the CT State Board of Education) or by a CT State College & University (governed by the CT Board of Regents);
2. **Located in a district high school, on a high school campus, on a college/university campus, or in a community location;**
3. Provided to students between the ages of 18 and 21 years old who have completed academic credits toward a regular High School Diploma, OR who are not working on academic credits toward a regular High School diploma; and
4. Provided to students who are working solely on secondary transition goals and objectives through an individualized education program (IEP), which may include functional academics.

**2. Transition/Vocational Services Provider (TVSP)**

In order to be recognized by the Connecticut State Department of Education (CSDE), Bureau of Special Education (BSE) as a **qualified** TVSP and included in the CT Transition Programs list on EdSight, **ALL** of the following required criteria must be met by each organization:

1. A non-public organization that serves as a private vendor/contractor to a public school district for transition/vocational services;
2. **Holds a current and valid contract as a vendor of the CT State Department of Aging and Disability Services (ADS) or the State of CT Department of Developmental Services (DDS);**
3. Serves students between the ages of 18 and 21 years old who have completed academic credits toward a regular High School diploma, OR serves students younger than 18 as a related service on an individualized education program (IEP); and
4. Offers transition/vocational services, which may include functional academics. (Note that these providers are not approved to provide academic credit toward a regular High School diploma).