



Success Engagement Education Determination



SEED Application

Application Packet must include and cannot be processed without:

1. Completed application along with essay questions.
2. High school evaluation report and/or IEP; other documents verifying disability.
3. Two written recommendations for the program from [High school personnel, mentor, OVR counselor, community provider, etc.]. Please no recommendations from parents/guardians.

Please Print/Type

Name: _____ L# (if applicable): _____

Address: _____ City: _____

State: _____ ZIP Code: _____ Phone: (cell) _____ (alternate) _____

Email Address: _____ Career Path: _____

Name of High School: _____

Parent/Guardian Name: _____

Parent/Guardian Phone: (cell) _____ (alternate) _____

Parent/Guardian Email: _____

Structure of Your Classes and Supports in High School (check all that apply)

<input type="checkbox"/> 15 or less students in class	<input type="checkbox"/> Individual Instruction	<input type="checkbox"/> 1:1 Aid/Support
<input type="checkbox"/> 20 or more students in class	<input type="checkbox"/> Resource Room	<input type="checkbox"/> Behavioral
<input type="checkbox"/> Social skills/Strategies	<input type="checkbox"/> 1:1 Aid/Support	<input type="checkbox"/> Academic
<input type="checkbox"/> Learning Support	<input type="checkbox"/> All day	<input type="checkbox"/> Both
<input type="checkbox"/> Emotional Support	<input type="checkbox"/> Half day	<input type="checkbox"/> Other: _____
<input type="checkbox"/> General Education	<input type="checkbox"/> As needed	

Independence – SEED requires a high level of independence (e.g. navigating the campus, attending classes, etc.). Which of the following do you complete independently now? (check all that apply)

<input type="checkbox"/> Tasks (or chores) at home	<input type="checkbox"/> Scheduling appointments	<input type="checkbox"/> Using technology
<input type="checkbox"/> Maintaining a job	<input type="checkbox"/> Asking for help	<input type="checkbox"/> Managing money/finances
<input type="checkbox"/> Traveling in the community	<input type="checkbox"/> Making friends	<input type="checkbox"/> Managing stress
<input type="checkbox"/> Completing school work	<input type="checkbox"/> Personal care (hygiene, etc.)	<input type="checkbox"/> Making important decisions



Lehigh Carbon
COMMUNITY COLLEGE

Disability Support Services
610-799-1190
mmitchell@lccc.edu

Work Experience (check all that apply)

Have you ever been employed/worked a paying job? Yes No

Have you ever done volunteer work? Yes No

Have you ever participated in a vocational program? Yes No

I'm applying for the following semester:

Fall (Summer Bridge required) Spring (experience required) Year: _____

Will you complete the required programming in K-12 or earn a GED? Yes No By: _____

If NO, will you receive a certificate of attendance? Yes No By: _____

Stress Triggers (check all terms which increase your stress level)

<input type="checkbox"/> Talking with others	<input type="checkbox"/> Traveling alone	<input type="checkbox"/> Not getting enough sleep
<input type="checkbox"/> Asking for help	<input type="checkbox"/> Change (routine, etc.)	<input type="checkbox"/> Parent involvement
<input type="checkbox"/> Social events	<input type="checkbox"/> Being on time	<input type="checkbox"/> Lighting
<input type="checkbox"/> Loud noises	<input type="checkbox"/> Things being out of order	<input type="checkbox"/> Not understanding instructions
<input type="checkbox"/> Large crowds	<input type="checkbox"/> Hearing feedback/criticism	<input type="checkbox"/> Prioritizing responsibilities
<input type="checkbox"/> Other: _____		

Social Interaction (check all that apply)

<input type="checkbox"/> I make friends easily	<input type="checkbox"/> I like to try new things	<input type="checkbox"/> I can talk to others if needed
<input type="checkbox"/> I keep friends easily	<input type="checkbox"/> I get along with family	<input type="checkbox"/> I can talk to teachers if needed
<input type="checkbox"/> I like being social	<input type="checkbox"/> I prefer to do things with family	<input type="checkbox"/> I prefer to be alone
<input type="checkbox"/> I enjoy talking to teachers	<input type="checkbox"/> I prefer to stay home	<input type="checkbox"/> I avoid talking to others
<input type="checkbox"/> I enjoy meeting new people	<input type="checkbox"/> I am active on social media	<input type="checkbox"/> I would like to be more social

How Did You Learn about SEED?

<input type="checkbox"/> Disability Services	<input type="checkbox"/> Conference or Event	<input type="checkbox"/> School: _____
<input type="checkbox"/> Friend	<input type="checkbox"/> Advisor	<input type="checkbox"/> Other: _____

Agreement

I, the below signed, understand that if I am selected for the SEED Program, I am expected to participate fully in the Summer Bridge program scheduled in July at the Lehigh Carbon Community College campus located in Schnecksville. I further understand that I will be responsible for my own transportation to and from all SEED-related activities and programming.



Essay Questions - Please answer each of the following questions in essay format. Using 200 words or less, type or print your response on a separate sheet(s) of paper, **OR** type on the computer in the spaces provided in this document (text boxes are size-limited per answer), save and email.

Your responses will be evaluated to determine whether you will be recommended to advance in the selection process. If selected, you will be contacted for a personal interview.

1. What is your career/academic goal?

2. What major event in your life demonstrates your commitment to achieving your goals? Talk about something that required your persistence to complete.

3. How will this program support you in attaining this goal?



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Directions for Response Section of SEED Application

Application responses can be typed into the boxes in this PDF form, saved and emailed back to <mailto:MMitchell@LCCC.edu>

Otherwise, all Application responses must be legible and submitted on 8 1/2" by 11" paper, and either type written (12 point and double spaced) or hand printed in ink on lined paper. Questions may be answered on the same or multiple pages. Include your name on each page and include the question before each response.

Criteria for Evaluation

1. Goals and interests expressed are aligned with the objectives of the SEED Program.
2. Each essay responds to the related question, is focused, and demonstrates the writer's desire and qualifications to move forward in the SEED selection process.
3. The writer supports his or her responses with examples or well-developed reasoning.
4. The writer organizes ideas.
5. Conventions of grammar, spelling and punctuation are demonstrated.

Completed application: Please deliver or mail to Michelle Mitchell, Educational Support Services, SH 150, 4525 Education Park Drive, Schnecksville PA 18078; or e-mail to <mailto:MMitchell@LCCC.edu>

PERM24A-x (AC)
02/12/26