

**Missouri
State**TM

BEAR POWER

Promoting **O**pportunities for **W**ork, **E**ducation and **R**esilience
STUDENT ADMISSIONS APPLICATION

The completed application and all required documents must be submitted by December 1st for priority consideration.

*Applicants will only be considered once all items in the checklist below have been submitted. You will receive email notification when your entire packet has been received. If selected for an interview, the applicant will be notified via email and will be interviewed independently as well as with their family/support person(s). Not all applicants who complete the application process will be interviewed due to limited space within the program.

Admissions Criteria

- Be a United States Citizen, and have completed a high school program
- Diagnoses of cognitive, intellectual and/or developmental disability, applicant must have qualified for special education services under IDEA
- Independently demonstrate the desire to attend the Bear POWER Program at MSU and live on campus
- Have sufficient emotional and independent living skills to participate in coursework and campus life
- Be able to remain unsupervised for a minimum of 8 hours
- Have a cell phone
- Demonstrate the ability to accept responsibility for their actions and maintain respect towards others and have no history of disruptive behaviors *program does not have the personnel or support needed to manage behavioral issues
- Have the ability to read and complete math at a functional level
- Have medical insurance and be independent in handling medications, dietary and/or medical needs *staff is not available to administer medications and cannot take responsibility for specialized diets or medical needs
- Participate in an interview with and without support from family/support person
- Complete reading and writing sample during interview
- Agree to participate in all courses, sessions, internships and employment training, if accepted
- Attend MSU Bear POWER Leadership Retreat, if selected to attend *this is the final step of our admissions process
- Attend MSU SOAR orientation, if accepted

Bear POWER Memorandum of Understanding and Code of Ethics

*All applicants must read and sign below.

If accepted a Consent to Exchange Information form must be signed to share relevant information with participating organizations. Equal Opportunity: Acceptance to Bear POWER is made without regard to race, color, ability, religion, national origin, age, gender, political affiliation, veterans' status or sexual orientation.

Please initial next to the following:

☐ I understand that I and my parent/guardians' may be requested for a program interview

☐ I understand that if admitted to the program I and my parents will be expected to attend the Leadership Retreat in the Spring on MSU campus.

☐ I understand that if admitted to the program, Bear POWER staff will take no responsibility for student's medication or dietary needs.

☐ I understand that if admitted, Bear POWER staff will evaluate SAP (Satisfactory Academic Progress) and if I am not progressing as expected and meeting program expectations, I could be put on Academic Probation and eventually removed from the program.

☐ I understand that if admitted, I am expected to follow the MSU Code of Conduct. If I violate this code of conduct I could be removed from the Bear POWER program.

I certify that all information on this application and supplementary documents is correct and complete. I understand that any untruthful statements in this application could result in my application being denied or immediate dismissal from the MSU Bear POWER Program. I understand that I am required to notify and update the MSU Bear POWER Program if any disciplinary or criminal incident occurs after submission of this application and prior to my enrollment in the Bear POWER Program at Missouri State University.

I have read and understand these statements:

Applicant Signature _____

Date _____

Parent/Guardian Signature _____ Date _____

Admissions Checklist

- Student Application
- Personal Statement and Student Questionnaire completed by applicant (student) *must indicate if a scribe was used
- Personal Support Questionnaire (completed by parent/support person)
- Parent/Guardian Readiness Questionnaire
- Official High School Transcript *must be sent directly from school
- Current IEP (Individualized Education Plan) or ISP (Individualized Service Plan) *May also included a Person-Centered Plan
- Behavioral Records – copy of Functional Behavior Assessments and/or Behavior
 - Intervention Plan for past five years *if student has no records must send a letter directly from school stating there is no record
- Documented comprehensive evaluation and diagnosis(es) of an intellectual or developmental disability by a psychologist or qualified professional:
 - Psychological Evaluation (most current)
- OR
 - Educational Evaluation (most current)
- Three recommendation forms from non-family members who have known the applicant for at least three years
 - Bear POWER has specific recommendation forms to be completed:
 - One from an educator
 - Two from non-family members
- Copy of guardianship agreement, if applicable

Applications and Recommendations should be mailed to:

MSU Bear POWER
Attn: Bear POWER Admissions Hill Hall 216
901 S National Avenue
Springfield, Missouri 65897

Admissions Timeline

1. Complete and submit application packet. Applicants will be notified via email once all information is received.
2. Completed application packets will be reviewed by the Bear POWER Admissions Committee.
3. Applicants will be notified via email if they have been selected for an interview. If selected, they will participate in an interview independently and with family/support person. They will also complete a reading and writing sample during the interview. This interview will be in the Spring.
4. Interview documentation will be reviewed by the Bear POWER Admissions Committee.
5. Applicants will be notified via email if they have been selected for the next step. The next step is the Leadership Retreat. The Leadership Retreat is a event where students will stay on campus and participate in college life and academic activities in the college setting. Parents will attend informational meetings.
6. The Bear POWER Admissions Committee will notify up to ten students via email if they are accepted into the MSU Bear POWER Program.
7. Students who are not selected for acceptance into the program will receive an email but will not receive explanation. *Bear POWER follows standard policy for Missouri State University admissions for all students who apply to the University.

Projected Program Cost

Bear POWER Student Projected Program Cost – Per Semester (Estimated) as of Fall 2025

Missouri Resident	Non-Missouri Resident
Academic Tuition and Fees - \$1,812 (\$302/credit hour)	Academic Tuition and Fees - \$3,876 (\$646/credit hour)
Hutchens Housing and Meal Plan (19 per week) - \$5,735	Hutchens Housing and Meal Plan (19 per week) - \$5,735
Dining Dollars – choose from \$192, \$242, or \$310 (these can be ussed at the student union)	Dining Dollars – choose from \$192, \$242, or \$310 (these can be ussed at the student union)
Bear POWER Program Fee - \$4,035	Bear POWER Program Fee - \$4,035
Student Services Fee (6 credit hours) \$723	Student Services Fee (6 credit hours) \$723
Books & Supplies - \$625	Books & Supplies - \$625
TOTAL COST: \$13,045 + dining dollars	TOTAL COST: \$15,003 + dining dollars

Student Information

Student's Full Name: _____

Nickname: _____

Gender: _____

Date of Birth: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Student's E-mail Address:

Student's Permanent Residence is with: _____

Does the student have guardianship in place? (if yes, please include a copy) _____

High School attended: _____

What is your estimated reading level? _____

Parent/Guardian Information

Parent/Guardian 1: Full Name:

Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Email Address (required)*: _____

Parent/Guardian 2 Full Name:

Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Email Address (required)*: _____

Emergency Contact Information

Name: _____

Relationship: _____

Cell Phone: _____

Other Phone: _____

Address: _____

How did you hear about the Bear POWER Program? (circle)

ThinkCollege.net

Internet Search

Facebook/Social Media

Conference

High School Guidance Counselor

Word-of-Mouth

Referred by _____

Other _____

Education History

*Official transcript must be sent directly from your school. It can be emailed to bearpower@missouristate.edu or mailed (address above)

Please list any high schools or colleges you have attended (Name, City, State):

What year did you or will you graduate from high school? _____

Describe inclusive educational experiences that you have had in high school.

Did you participate in general education classes? What accommodations and/or modifications were used?

[illegible]

What is your favorite thing about school?

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[illegible]

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* Employment experience is not a requirement for admission. If you have a resume and references, please attach to this application.

If yes, where, and how many hours a week? _____

Describe two of your most recent jobs, internships, or volunteer experiences at school or in the community:

Job #1

Job site: _____

Job title: _____

Responsibilities:

Dates: _____

Hours per week: _____

Was this a paid position? _____

Why did you leave? _____

Job #2

Job site: _____

Job title: _____

Responsibilities: _____

Dates: _____

Hours per week: _____

Was this a paid position? _____

Why did you leave? _____

What did you enjoy most about your work experiences?

What did you find most challenging about your work experiences?

[illegible]

Service Agencies

*Information may be used to help the Bear POWER team in supporting transition throughout the program.

Are you currently receiving services or support from:

Department of Mental Health _____

Regional Case Manager _____

Department of Vocational Rehabilitation _____

Social Security Administration _____

Do you have a Medicaid Waiver? _____

List any other service providers/agencies you are receiving services from:

Have you received any funding to attend a post-secondary program?

Health

Please list applicant's documented intellectual and/or developmental disabilities:

Please list any mental health issues the applicant has experienced in the last 10 years:

List all prescription and over the counter medications that you currently take:

Medication/Purpose: _____

Times per day/Time of day taken:

Do you currently need support/assistance with taking your medications? If so, please list these supports (people and/or technology).

Please list any accommodations and/or modifications that you need to be successful in the following categories:

Academic coursework:

Independent living (Bear POWER is a residential program):

Social skills:

Internship/Vocational Skills:

Any other accommodations and/or modifications needed for daily life skills:

Do you have a service animal or an assistive technology device?

Do you have a Person-Centered Plan? If so, please attach to this application.

Student Personal Statement

*Please answer the following question in your own words without assistance from others.
Response could be typed and attached to this application.

Student Questionnaire

Why do you want to participate in the Bear POWER Program at Missouri State University and what are your plans after graduating from the Bear POWER Program?

What do you think is your greatest strength?

[illegible]

What do you think will be the most challenging part of college for you?

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Describe three goals you have for yourself while in college.

Describe a typical day and what it looks like. What do you enjoy most? Least?

How do you spend your free time?

Describe a friendship you have with a family member, mentor, or friend and why it is important to you.

[illegible]

Have you ever traveled and been away from your family for an extended period of time? What was that experience like for you?

[illegible]

Parent Questionnaire

What goals does the family/parent have for the student while in college?

Describe a job(s) you think would be a good fit for the student following graduation from the Bear POWER Program, based on the student's strengths and interests.

How does the student manage anger/anxiety?

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PERSONAL SUPPORT INVENTORY

(To be completed by parent or guardian or support person)

Student Name _____ **Completed by:** _____

Please fill in the information below as completely and honestly as possible. This information gives a greater understanding of the student's functional level and is not a determining factor in acceptance to the Program.

Independent Living Skills	
Skill	Select which describes the student's ability level:
Finds a way around new environment	Has never had the opportunity
	Needs complete assistance
	Needs limited assistance
	Completely independent
Follows a schedule independently	Has never had the opportunity
	Needs complete assistance
	Needs limited assistance
	Completely independent
Bathes daily	Needs daily reminders
	With prompting/schedules
	Completely independent
Changes clothes daily	Needs daily reminders
	With prompting/schedules
	Completely independent
Brushes teeth daily	Needs daily reminders
	With prompting/schedules
	Completely independent
Uses good judgement in an emergency	Has received instruction, but has not been in the situation
	Has not received instruction
	Completely independent
Copes well with stress	Needs assistance
	Has and uses coping strategies
	Independent
Adjusts well to new environments	Needs much assistance
	Needs little assistance
	Independent
Prefers to do things for himself/herself	Yes
	No
	Frequently requests assistance

Independent Living Skills (Cont.)

Laundry		Sorts
		Operates washer
		Operates dryer
		Folds
		Irons
		Does not do laundry
Cooks		No
		Completely independent
		Very basic (Example: _____)
Has attended camp away from home		Yes (For how long? _____)
Sets appointments for himself/herself		Yes
		No
Has travelled		Yes, flown with adult
		Yes, flown alone
		Yes, bus with adult
		Yes, bus alone
		No
		Other: _____
Has driver's license		Yes, drives on own
		Yes, drives with parent/adult only
		Learner's Permit only
		Student does not drive
What chores is the student responsible for at home?		
Is the student able to manage his/her own time?		Arrives on time
		Allows enough time to walk to classes, etc.
		Uses alarm clock
		Uses schedule or day planner
		No

Independent Living Skills (Cont.)

Is the student independently able to use:		Laptop
		Debit card
		Flash drive
		Cell phone
		ATM
		Email
		Attach a document to an email
		Printer
Cuts fingernails and toenails		Needs complete assistance
		Needs daily reminders
		With prompting/schedules
		Completely independent
Shaves face/legs		Needs complete assistance
		Needs daily reminders
		With prompting/schedules
		Completely independent

Social Skills and Communication

Communicates needs appropriately		Yes
		No
		With prompting
Engages in age-appropriate interaction		Yes, socializes with same age peers
		Does not socialize
		Socializes mostly with family
		Socializes with traditional students
		Socializes only with students with disabilities
Deals with conflict		Needs much assistance
		Seeks assistance
		Needs limited assistance
		Independent
Distinguishes between friends and strangers		Yes
		No
		Has not been in the situation

Social Skills and Communication (Cont.)

Follows rules		Yes, is a rule follower
		Needs reminders
		Struggles following rules
Respects authority figures		Yes
		No
		Depends on the relationship
Uses cell phone		Phone calls
		Text messages
		Calendar/day planner
		Alarms
		Apps
		Internet browsing
Is able to provide personal information		Address
		Emergency contact
		Medication information
		Insurance information
		Phone number
		Email address
Uses email		Has email account but does not use
		Uses account with assistance
		Uses account independently
		Uses a flash drive
		Remembers passwords
		Needs reminders for passwords
Maintains appropriate social behavior		With prompts
		Independently with family
		Needs reminders in public situations
		Independently in public situations
How does the student manage anger/anxiety?		

Academic Skills		
Reading skills Approximate grade level reading ability: _____		No functional reading
		Reads chapter books
		Reads books silently
		Can answer questions about a reading selection
		Can summarize a reading selection
		Reads books for pleasure
		Makes inferences
	Title of last book read: _____	
Math skills Approximate grade level: _____		Handles money to make purchases Counts change in bills
		Manages a checking account
		Stays within a budget
Computer skills		Word processor
		Internet search
		Remembers password
		PowerPoint
		Requires assistance
		Uses Mac
		Uses PC
Has participated in inclusive class		No
		Yes, independently
		Yes, with assistant
		Yes, with accommodations
Following verbal directions		Yes
		No
		With reminder
Following written directions		Yes
		No
		With reminder
Time management skills		Uses a calendar
		Makes appointments
		Needs complete assistance
		Keeps planner/agenda
		Sets reminders on phone
		On time

Academic Skills (Cont.)

Study habits		Studies independently
		Has tutor
		Requires one on one assistance
		Requires prompting
		Does not have homework
Note-taking skills		Takes own notes
		Uses technology
		Requires copies of notes
Writing skills Approximate grade equivalent: _____		Has written papers
		Writes simple sentences
		Drafts, revises, and edits
		Writes short paragraphs
		Uses punctuation
		Takes notes during class
		Copies notes from board
		Does not write
		Uses technology for writing
Listening skills		Is auditory learner
		Able to retell settings, problems, events, and solutions
		Create questions based on information presented
Tutor/assistant		Attended class with student
		Assisted with work one on one
		At home tutor
		No tutor or assistant
Assistive technology		iPad apps
		Live Scribe Pen
		Laptop
		Voice recognition software
		Dragon Naturally Speaking
		Evernote
		Recording device
		One Note
		Google apps
		Other: _____

PARENT/GUARDIAN READINESS SURVEY

(To be completed by parent or guardian or support person)

Applicant Information

Student Applicant: _____

Parent/Guardian: _____

Student Safety	
	Please select which statement is true:
I expect to know everything my student does at college.	Strongly Agree
	Agree
	Neutral
	Disagree
	Strongly Disagree
I expect one-on-one support for my student all day.	Strongly Agree
	Agree
	Neutral
	Disagree
	Strongly Disagree
I worry about my student talking to other students unsupervised.	Strongly Agree
	Agree
	Neutral
	Disagree
I worry about my student crossing the street.	Strongly Agree
	Agree
	Neutral
	Disagree
I check to see if my student has the correct facts.	Strongly Agree
	Agree
	Neutral
	Disagree
	Strongly Disagree

Post-Secondary Programs		
I need to know the homework assignments for each class my student takes in college.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
I need to know the calendar of social activities offered to my student.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
I know my student, with support, will develop friendships.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
I know my student, with support, will try new opportunities.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
Direct Involvement		
I would like to attend classes to see my student interact with others.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
Often, I am in contact with my student more than three times a day.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
Often, I am telling my student what to do or say.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree

I check up on my student in person if I can.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
I understand I will have very limited contact with the Bear POWER Program and that communications will go through my child.		YES
		NO

Student's Strengths and Challenges

My student can handle frustration appropriately.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
I trust my student's judgement.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
My student can seek assistance.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
I believe I am ready for my student to leave home to college.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
I feel that my student knows what is best for him/herself.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree

Concerns about the Future		
I believe a post-secondary education is important for my student.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
I feel that my student wants to attend college.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
My student will live independent of our family after graduation.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree
My student will have meaningful employment after graduation.		Strongly Agree
		Agree
		Neutral
		Disagree
		Strongly Disagree



BEAR POWER

Recommendation Form

(Applicant name)

The student named above has applied for admission to the Bear POWER program at Missouri State University. (Visit our [website](#) to learn more about the program). Bear POWER is an inclusive college program for students with Intellectual and Developmental Disabilities. Bear POWER is a two-and-a-half-year (five semesters) residential program; students will live on campus and be fully integrated into academic courses, social experiences, and internships. Faculty will undergo training in coursework modifications for students. Bear Ambassadors are student volunteers that will support Bear POWER students with integration in both academic and social areas within campus life. Following graduation from the program students will earn a Bear POWER Certificate and walk in the graduation ceremony at Missouri State University.

*Please answer the following questions to the best of your ability (complete online or mail to the Bear POWER Admissions Committee at Missouri State University address listed on the last page of this document). Applications will not be reviewed without recommendations. Your timely completion and mailing of this form are greatly appreciated by the applicant. If you have any further questions, please contact Bear POWER at bearpower@missouristate.edu.

Thank you,

Bear POWER Admissions Committee

Contact Information

Your Name: _____

Title/Organization: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email Address: _____

How long have you known the student and in what capacity?

How do you feel the student would benefit academically from post-secondary education?

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

Do you feel the student would benefit socially from an inclusive college experience?

How would the student benefit in the area of career development from post-secondary education? What kind(s) of job(s) do you feel would be a good fit for the student based on their strengths and interests?

Have you seen any behaviors from the student that might interfere with his or her ability to live on campus and participate in the Bear POWER program? *All Bear POWER students are required to live on campus.

What are the student's strengths?

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

What challenges do you anticipate for the student's successful integration into university life?

[illegible]

Discuss how you have seen the student manage a stressful situation.

Discuss the student's social skills that you have observed with same-age peers.

What kinds of support and/or modifications do you feel would be most helpful for the student to be successful in the Bear POWER program?

Do you have any additional information about the student you would like to share with the Bear POWER Admissions committee in determining if the program is a good fit for the student? *If you need more space, please attach an addition page.

Please return the completed form to:

MSU Bear POWER
Attn: Bear POWER Admissions Hill Hall 216
901 S National Avenue
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BEAR POWER

Recommendation Form

(Applicant name)

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Thank you,

Bear POWER Admissions Committee

Contact Information

Your Name: _____

Title/Organization: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email Address: _____

How long have you known the student and in what capacity?

How do you feel the student would benefit academically from post-secondary education?

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Do you feel the student would benefit socially from an inclusive college experience?

How would the student benefit in the area of career development from post-secondary education? What kind(s) of job(s) do you feel would be a good fit for the student based on their strengths and interests?

Have you seen any behaviors from the student that might interfere with his or her ability to live on campus and participate in the Bear POWER program? *All Bear POWER students are required to live on campus.

[illegible]

What are the student's strengths?

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What challenges do you anticipate for the student's successful integration into university life?

[illegible]

Discuss how you have seen the student manage a stressful situation.

Discuss the student's social skills that you have observed with same-age peers.

What kinds of support and/or modifications do you feel would be most helpful for the student to be successful in the Bear POWER program?

Do you have any additional information about the student you would like to share with the Bear POWER Admissions committee in determining if the program is a good fit for the student? *If you need more space, please attach an addition page.

Please return the completed form to:

MSU Bear POWER
Attn: Bear POWER Admissions Hill Hall 216
901 S National Avenue
Springfield, Missouri 65897



BEAR POWER

Recommendation Form - EDUCATOR

(Applicant name) The student named above has applied for admission to the Bear POWER program at Missouri State University. (Visit our [website](#) to learn more about the program). Bear POWER is an inclusive college program for students with Intellectual and Developmental Disabilities. Bear POWER is a two-and-a-half-year (five semesters) residential program; students will live on campus and be fully integrated into academic courses, social experiences, and internships. Faculty will undergo training in coursework modifications for students. Bear Ambassadors are student volunteers that will support Bear POWER students with integration in both academic and social areas within campus life. Following graduation from the program students will earn a Bear POWER Certificate and walk in the graduation ceremony at Missouri State University.

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Thank you,

Bear POWER Admissions Committee

Contact Information

Your Name: _____

Title/Organization: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email Address: _____

How long have you known the student and in what capacity?

How do you feel the student would benefit academically from post-secondary education?

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Do you feel the student would benefit socially from an inclusive college experience?

How would the student benefit in the area of career development from post-secondary education? What kind(s) of job(s) do you feel would be a good fit for the student based on their strengths and interests?

Have you seen any behaviors from the student that might interfere with his or her ability to live on campus and participate in the Bear POWER program? *All Bear POWER students are required to live on campus.

What are the student's strengths?

What challenges do you anticipate for the student's successful integration into university life?

Discuss how you have seen the student manage a stressful situation.

[illegible]

Discuss the student's social skills that you have observed with same-age peers.

[illegible]

What kinds of support and/or modifications do you feel would be most helpful for the student to be successful in the Bear POWER program?

Do you have any additional information about the student you would like to share with the Bear POWER Admissions committee in determining if the program is a good fit for the student? *If you need more space, please attach an addition page.

Please return the completed form to:

MSU Bear POWER
Attn: Bear POWER Admissions Hill Hall 216
901 S National Avenue
Springfield, Missouri 65897