



**OFFICE OF DISABILITY SUPPORT SERVICES**  
**SMART START 2017**  
**APPLICATION**

Smart Start is a pre-orientation program designed for students with a documented disability who plan on registering with The Office of Disability Support Services. Smart Start's aim is to help students with disabilities make a smooth transition from high school into college.

Smart Start begins with student's moving in early to their dorms on Tuesday August 22nd. There is a meet & greet in the evening on Tuesday August 22nd. On Wednesday August 23rd students and families will learn about the transition to CUA and how to utilize CUA resources, including the Office of Disability Support Services. Breakfast and lunch will be provided on Wednesday, August 23rd.

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Home Address: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

If known, CUA Email: \_\_\_\_\_@cua.edu

Personal Email: \_\_\_\_\_

Diagnosed disability(ies): \_\_\_\_\_

My documentation is already on file with DSS:  Yes  No If no, I will be submitting it on: \_\_\_\_\_

Do you plan to move-in early on Tuesday, August 22<sup>nd</sup>?  Yes  No

Would you like to meet with the DSS staff to discuss accommodations on:

Tuesday, August 22<sup>nd</sup> between 9am and 4pm  Yes  No or:

Wednesday, August 23<sup>rd</sup>, between 5pm and 8pm?  Yes  No

Will you be joined by family on Tuesday, August 22<sup>nd</sup>?  Yes  No

If so, please indicate the number of members in your party: \_\_\_\_\_

Will you be joined by family on Wednesday, August 23<sup>rd</sup>?  Yes  No

If so, please indicate the number of members in your party: \_\_\_\_\_

Do you or any members of your party have any dietary restrictions? If so, please state.

\_\_\_\_\_

Names of family members attending the parent information sessions:

Name	Email	Relationship to Student

Please rate on a scale from 1 to 10 your confidence right now in the following areas:  
 (1 being not confident and 10 being extremely confident):

	1	2	3	4	5	6	7	8	9	10
Knowledge of your Disability										
Talking about your Disability										
Test-Taking Skills										
Study Skills										
Time Management										
Organization										
Notetaking										
Self-Advocacy										
Assistive Technology										

I would like to improve the following skills during Smart Start: \_\_\_\_\_

\_\_\_\_\_

At Smart Start I would like to: \_\_\_\_\_

\_\_\_\_\_

I understand that signing this document does not automatically guarantee acceptance to Smart Start. I will be notified as to the status of my application through e-mail. Also, I understand that if I take part in this program, I can move onto campus on Tuesday, August 22<sup>nd</sup>. If I move in early I will uphold all rules and regulations set forth by the university.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Note: Space is limited. Applications and documentation will be reviewed in the order in which they were received and program acceptance will be completed on a rolling basis.