

SOAR Application Purpose and Timeline

The purpose of the application packet is to outline the application process for SOAR applicants. This application packet will enable the Adult Basic Education Coordinator to properly assess each applicant's CASAS reading score, interests, technical skills, guaranteed transportation to and from A-B Tech, Vocational Rehab (VR) documentation or counselor, and ability to attend A-B Tech Continuing-Ed classes or other technical skills development classes without instructor supervisor when traveling to and from different A-B Tech campus buildings for career related classes.

The goal is to make sure each candidate will be successful given the structure and purpose of the SOAR program and achieve skills development for competitive employment in a skills area the candidate will enjoy and find fulfilling. SOAR is best viewed as a two-year commitment to attend classes focused on assisting students to seek career development skills and/or a job.

The Application Process and Accommodation Information

Accommodation Services

In the case of an otherwise qualified individual with a documented disability, appropriate and reasonable accommodations will be made unless to do so would fundamentally alter the essential training elements, cause undue hardship, or produce a direct threat to the safety of the student or employee.

Asheville-Buncombe Technical Community College is invested in full compliance with the Americans with Disabilities Act (ADA). Support Services is part of Student Services and is in the K. Ray Bailey Student Services Center.

For detailed information or to request accommodations visit [Support Services](#).

<https://abtech.edu/student-resources/support-services-overview>

An appointment is recommended prior to enrollment to discuss any special concerns.

If the student needs accommodations for the application/interview/testing process, please request accommodations through [Disability Support Services website](#) (opens in new window).

Accommodations could be for extended time on the placement test, separate setting for placement test, or ASL Interpreter for the interview, to name a few examples. If you have any questions, please contact Support Services (828-398-7141).

Please read carefully.

Click on the A-B Tech Technical Standards and carefully review the Standards. Download the application and complete the application.

Process

1. Applicants must submit a completed application.
2. Applications may be submitted to Barbara Fedock via email at barbarafedock@abtech.edu or to Barbara Fedock in Office Room Number 212 in Hemlock Building on the A-B Tech Asheville campus.
3. Each application that is successfully submitted and completely filled out will be reviewed by Barbara Fedock.
4. After the application is received and reviewed by Barbara Fedock, a date and time for CASAS testing and an interview will be set.

CASAS TESTING AND INTERVIEW PROCESS

1. Each applicant will take a CASAS reading test.
2. Applicants must score at least 194 on the initial CASAS test taken to be eligible. No retests will be administered or considered. If an applicant does not score at least 194, the applicant will be encouraged to reapply to the SOAR program again at the beginning of a next program year.
3. After the CASAS testing, Barbara Fedock will review A-B Tech and SOAR classroom conduct policies, attendance expectations, moving around on the campus independently, and technical standards requirements with eligible applicants.
4. Barbara Fedock will discuss SOAR goals with each eligible applicant.
5. Barbara Fedock will interview each eligible applicant.
6. Barbara Fedock will notify eligible applicants whether they were accepted.

SOAR APPLICATION

APPLICANT'S PERSON INFORMATION

Name _____
Last First Middle

Address _____ Zip Code _____

Street

City

State

Email Address _____

Home Phone, if applicable _____ Cell Phone, if applicable _____

Date of Birth _____

PARENT/GUARDIAN PERSONAL INFORMATION

Name _____ Email _____

Address _____ Zip Code _____

Email Address _____

Home Phone, if applicable _____ Cell Phone, if applicable _____

EMERGENCY CONTACT

Email Address _____

Home Phone _____ Cell Phone _____

EMERGENCY CONTACT (Someone who does not live with applicant)

Email Address _____

Home Phone _____ Cell Phone _____

EDUCATIONAL BACKGROUND

Do you have any of the following?

High school diploma Yes ___ No ___ If yes, what high school? _____

High school equivalency Yes ___ No ___ GED ___ HiSet ___ Other _____

Certificate of Completion Yes ____ No ____

Total number of years in high school _____

TRANSPORTATION

How will the applicant get to SOAR classes and be picked up each day of classes?

Which of the following is this type of transportation?

Self/Family _____ (Who? _____) Private (Uber/Lift) _____

Public Transportation _____ Other (Be specific) _____

SERVICE AGENCIES

Does the applicant have VR documentation? Check one. Yes ____ No ____

Does the applicant have a Vocational Rehabilitation Counselor? (VR Counselor)

Yes _____ No _____ If yes, name of counselor _____

Expectations

Very Important

If and/or when it is appropriate or necessary, will you the applicant be able to **independently** navigate to a variety of different AB Tech educational buildings or facilities **without** an AB staff member or your instructor's supervision, prompting, or guidance? Yes ____ No ____

Will you fully adhere to the A-B Tech Classroom Code of Conduct? Yes ____ No ____

Applicant Questionnaire

The following questions must state the sincere, honest, and thoughtful responses of the applicant who is applying to the SOAR program.

Parent(s)/Guardian(s) Please Note...

Parents/ guardians or others please make sure that the applicant's responses do not reflect your influence, opinions, or feelings.

To be successful in the SOAR two-year program, SOAR applicants must be dedicated to meeting the goals and purpose of the program.

Applicant

Why are you applying to be part of the SOAR Program?

If you are in the SOAR program, what will your specific goals be?

At this point, what technical career(s) or specific technical skill(s) do you think you would like to prepare for, learn about, or complete at A-B Tech during the two-year SOAR program?

Why does/do the technical career or specific technical skill(s) you included in question 3 above appeal to you?

Are you committed to attending SOAR classes Monday through Thursday for two years?

Yes _____ No _____

Are you committed to being independent, following the A-B Tech Classroom Code of Conduct, and not expecting A-B staff members or instructors to supervise lunchtime, breaks, going to Continuing Education/technical classes in different campus buildings, or while you are on campus?

Yes _____ No _____

Read and carefully think about the following question. Seriously consider your answer, and only select and **check one answer**.

Which statement best describes how seriously committed you are to seeking a career and/or finding a job that will use skills learned and practiced during the SOAR program?

Check the line that shows how you honestly feel.

CHECK ONLY ONE LINE.

- 1 I am not interested in seeking a SOAR related job/career. _____
- 2 I probably will not seek a SOAR related job/career. _____
- 3 I probably will seek a SOAR related job/career. _____
- 4 I am interested in seeking a SOAR related job/career. _____