



## Application Form

**Applicant's Information:**

Applicant's Name:

Gender:

Birthday (mm/dd/yyyy):

Home Address:

Phone Number:

Diagnosis:

Medications (list all medications prescribed with doses and times that they are taken):

List all hospital stays/surgeries within the past 5 years.

Allergies or food sensitivities:

Does the applicant have an EpiPen?

Does the applicant have seizures: If yes, what do they typically look like? What is the typical frequency? What is the individual's seizure protocol?

Does the applicant require mobility aids or need added support with mobility? If yes, please describe.

Does the participant require any assistance with toileting, eating or changing? If yes, please describe the support required.

Does the applicant have a history of demonstrating aggressive behaviour? If so, what does this look like and what is the behaviour plan in place? What is the current frequency of behaviour?

Have emergency personnel ever been called? If so, how frequently?

Dislikes/Fears:

What are some skills that you would like to work on/see the applicant work on?

What does a typical daily routine look like for the applicant (wake time, meals, activities, bedtime routine):
Do you/the applicant consent to photos being taken and posted to social media/marketing material's with the individuals first name? YES NO
Is the applicant permitted to leave the program independently? YES NO
Is the applicant able to administer their own medication (including over the counter medications)? YES NO
Does the applicant wear a life jacket when swimming in a pool? YES NO
Does the applicant have a valid form of photo identification? * YES NO
<p>When attending a group activity, what level of support do you feel the applicant will be most successful with when in the community?</p> <ul style="list-style-type: none"> <li>• Minimal supervision (1:6)</li> <li>• Moderate supervision (1:3/1:4)</li> <li>• 1 on 1 support</li> </ul>
<p>*Accepted photo identification (must have at least one of the following): Driver's Licence, Passport, Government Employment Card, Military Employment Card, Age of Majority Card, Canadian Citizenship Card, Indian Status Card, International Student Card, Permanent Resident Card, Possession and Acquisition Licence, Ontario Photo Card for Non Drivers.</p>

<b>Contact's Information:</b> (Primary contact for the applicant)
Name:
Relation to Applicant:
Phone Number:
Email Address:
Preferred Method of Contact: <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Text Message
How did you hear about OVCC Services? <ul style="list-style-type: none"> <li>• Website</li> <li>• Facebook</li> <li>• Twitter</li> <li>• Friend/Family Member</li> </ul>

• Other \_\_\_\_\_

**Emergency Contact:**

Name:

Phone Number:

Alternate Phone Number:

Relation to the Applicant:

**Any other information you would like OVCC staff to know:**

**For the Applicant:**

What activities do you like to do?

- ☐ Swimming
- ☐ Bowling
- ☐ Movies
- ☐ Video Games
- ☐ Art
- ☐ Arcades
- ☐ Dancing
- ☐ Other \_\_\_\_\_

What kind of work/volunteer activities do you like to do?

- ☐ Gardening
- ☐ Cleaning
- ☐ Dog walking
- ☐ Yard maintenance
- ☐ Customer service
- ☐ Baking/cooking
- ☐ Other \_\_\_\_\_

Why would you like to be a part of Ottawa Valley Community Connections?

I am interested in:

- ☐ Day Program (Runs Monday-Thursday from 9:00-3:30)
- ☐ Friday Adventures ("big" outing every Friday, times vary)
- ☐ 1:1 Respite (daytime, evening and/or weekend)
- ☐ Kids' Group (Summer, March Break, Christmas, Weekends)
- ☐ Overnight respite (in your home or at OVCC)
- ☐ Group "socials" (large group activities-usually once per month on a Friday or Saturday)

☐ Job matching/job coaching

Please explain your "ideal" days/times/services:

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Thank you for your interest in OVCC Services!  
We will get back to you regarding your application as soon as possible.



### What's Needed?

Below is a list of items that need to be packed each day. If a participant does not arrive with the needed gear, we cannot guarantee that they will be able to participate in the planned activity. An alternate activity may be offered, though we are really encouraging all participants to arrive prepared. If possible, we strongly encourage participants to use the checklist below to pack their own bags, as packing needed items (and being responsible for said items) is an important life skill.

Please ensure that all items sent are labelled with a first and last name.

When registered for a group ratio, staff will prompt participants to check that all items have been packed. Staff are not responsible for packing bags or items that are forgotten/misplaced.

For individuals registered for 1:1 support, staff will provide support in packing and checking bags (as needed, while promoting as much independence as possible).

**Different groups may do different activities- not everyone participates in the same activities each day. Activities are planned based on budget, abilities, weather, group interaction, support worker ratio, etc. We will always do our best to provide fun and meaningful activities for everyone, each day!**

#### Every Day:

- ☐ Water bottle
- ☐ Indoor shoes
- ☐ Good outdoor footwear
- ☐ Lunch and snacks on even numbered calendar days (lunch provided on odd numbered days, except Fridays)
- ☐ Bathing suit
- ☐ Towel

	<input type="checkbox"/> Sunscreen <input type="checkbox"/> Bugspray <input type="checkbox"/> Medication (if applicable)
<b>Summer Months:</b>	<input type="checkbox"/> Hat <input type="checkbox"/> Sunglasses <input type="checkbox"/> Water shoes <input type="checkbox"/> Life jacket <input type="checkbox"/> Bike Helmet
<b>Winter Months:</b>	<input type="checkbox"/> Hat <input type="checkbox"/> Waterproof mittens <input type="checkbox"/> Layers <input type="checkbox"/> Good boots <input type="checkbox"/> Neck warmer <input type="checkbox"/> Extra socks



### Ottawa Valley Community Connections Inc.

The information below outlines important terms and conditions regarding payment and OVCC's regulations. The applicant's parent/guardian is responsible for signing the form below if the applicant is not making payment/registering themselves.

I, the undersigned, understand and agree to the following terms:

#### 1. Fees

Fees are established based on the level of support required. Level of support is determined via intake paperwork, along with initial intake assessment. Once services begin, the level of support may need to be adjusted. This is at the discretion of OVCC. Level of support must be accurate for this setting, in order to keep participants safe while providing a high level of activity.

An invoice will be emailed via Quickbooks. The invoice will have a set due date. Payment must be made by the listed date in order to maintain registration. If payment is late, there will be a 10% late fee added. We require payment on time to pay staff members, book activities and pay all overhead expenses.

When registering, you are invoiced for the month in advance. For example, January invoice will be sent no later than January 3rd and will include all dates registered in January. This maintains your participant's space (we staff and plan based on registration). **There is no refund for missed days.** If you know that your participant is going to be away, and thirty (30) days written notice is provided, we will do our best to accommodate registration on an alternate date (this is based on notice and availability).

For respite, there will be an additional fee for mileage/activities (in addition to staffing costs). We will work with the parent/guardian to determine what types of activities they would like to see and what the

associated costs for these activities will be. These costs will be added to the monthly invoice.

OVCC provides invoices that may be accepted by outside funding sources (Passport Funding, for example). OVCC does not guarantee that services are covered by outside funding.

Transportation may be available at an added cost. Costs will be added to the monthly invoice.

When registered for group transportation, OVCC follows the bus schedule and reserves the right to cancel transportation at any time due to inclement weather or participant safety. We do not reimburse for cancelled transportation. Program remains open each day.

If your participant is picked up late from program/respite, there will be an added late fee.

For withdrawal from program/respite, we require 30 days written notice.

Fees are subject to an annual increase on January 1st. This annual revision covers our operational cost increase due to inflation.

## **2. Last Minute Changes/Dates Away**

If your participant is not able to attend a day that they are registered for, we ask that you text or email Eireann, the Program Lead, for all Day Program participants (613-343-4414 [ski4eireann@hotmail.com](mailto:ski4eireann@hotmail.com)) or Holly, the Program Coordinator, for all Respite/Kids' Group bookings (613-716-7664 [ovcconnections@gmail.com](mailto:ovcconnections@gmail.com)).

We ask that you only text Monday-Friday between the hours of 8:00am-4:00pm.

If absent because of illness, our policy is 24 hours symptom free before return to services. Participants cannot attend program if ill and will be sent home if symptoms develop while at OVCC.

## **3. Programming**

Programming is determined based on participants registered. There may be multiple groups running at one time to suit everyone's needs. We do not provide a schedule of events in advance, as things often change last minute. If your participant arrives with all needed items, they will always be prepared for all activities offered. We provide all other pertinent information via Remind. Please join: <https://www.remind.com/join/367k42>

For respite, staff will plan activities based on budget and intake information provided. Parents/participants are welcome to suggest activities.

## **4. Concerns/Complaints**

Please always feel free to contact the Program Lead or Program Coordinator with any concerns or complaints. We will always work with you to resolve any issues.

## **5. Information**

The more information we are provided on the intake paperwork, the better we can support the applicant. All information is shared with OVCC staff members, where there is a strict confidentiality policy in place. If there is something your participant **is not** to do, it must be listed on the intake paperwork or communicated in writing via email to [ovcconnections@gmail.com](mailto:ovcconnections@gmail.com).

## **6. Safety**

Safety is our main priority. Staff will always assess risk and plan based on this.

We require all participants to wear life jackets when swimming in the river.

Participants must wear a helmet when biking, tobogganing, or on motorised ATVs. OVCC will provide

helmets for ATVing.

## **7. Medication Administration**

If your participant requires medication to be administered by OVCC staff, it must be listed on intake paperwork (medication name, time, dose and “to be administered” written next to it with any specific administration instructions. We then require medication to be provided to staff in the original bottle with medication name, dose, time and participant name listed. Rescue meds require the same information, paired with specific information on when it is to be issued with a detailed protocol provided.

If the participant is self-administering any medication, the above must still be followed, with “self administers” listed beside the medication on the intake paperwork. Please include if the participant is permitted to bring and self-administer over the counter medications (Advil & Tylenol, for example).

## **8. Requests**

We will always do our best to accommodate all respite/program/overnight requests, though registration is based on availability/fit.

## **9. Behaviours**

If your participant develops/exhibits behaviours that affect the group, we will communicate via text/email to establish a plan. If behaviours are not resolved, an in-person meeting will be arranged. OVCC is willing to work with parents/guardians and outside community resources to ensure everyone’s success. If the behaviour continues, and the participant is no longer successful in a group setting, we will offer to provide 1:1 support in an alternate setting. Once the behaviour begins to improve, we will slowly transition back to a group setting.

If personal belongings (staff members’ or participants’) are damaged during a behavioural outburst, the participant/family is responsible for the cost of repair/replacement.

## **10. Assumed Risk** Please note that there is assumed risk with all activities- we are a group of individuals all with different needs. We do our best to group participants with the level of support that is best suited for their safety, and then assess risk on all activities that we do. OVCC staff will always do their best to mitigate risk, but there is always the chance of injury. By signing this form, you are allowing your participant to participate in any activities deemed suitable by OVCC and will not hold OVCC liable in the case of injury.

Date: \_\_\_\_\_

Participant’s Full Name: \_\_\_\_\_

Parent/Guardian Full Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Support Questionnaire:

Does the individual use the washroom independently?

Is the individual comfortable with animals?

Is the individual kind toward animals?



Does the individual have seizures?

Prompting to use washroom needed?

Medication administration?

Will your participant stay with the group?

If separated from the group, would the participant know how to ask someone for help?

Can the participant follow 2 step-direction in a group setting?

Can the participant eat independently?

Can the participant Cut food independently?

Can the participant buckle up seatbelt independently?

Does the participant change/undress/dress or independently?

Does the participant demonstrate street safety independently?

Can they apply sunscreen independently?

Will the participant Interact with staff and peers/community members without prompt?

Can the participant swim?

Can they ride a bike or trike?

Any chance of verbal or physical aggression?

Can they pack up their own belongings?

Are they responsible for their own belongings?

Is there a tendency for sexually inappropriate behaviour?

Can the individual communicate their needs?

Does the individual make friends easily?

Is the individual comfortable walking up to 5km at a time?

Is the individual easily motivated to participate in group activities?

Thank you!

