



Thrive Program Application

What is the Thrive Program?

Thank you for your interest in the Thrive Program! This online program aims to maximize a person's understanding of their life through self-determination, and help them set goals for self-regulation and decision making. We will specifically address this by offering opportunities for adults to develop knowledge and skills in the following areas:

- 1) Self-awareness, self-determination & self-advocacy
- 2) Life management, personal health, and financial literacy
- 3) Career exploration and preparation

What will participation look like?

Participants of the Thrive Program will:

- 1) Complete an application to share information about themselves
- 2) Attend weekly evening classes online for three months on the dates outlined under time commitment
- 3) Develop personal goals and next steps for working toward those goals

Who can apply?

We hope to recruit individuals ages 18-30 with a confirmed diagnosis of Autism Spectrum Disorder who are:

- 1) Their own guardian
- 2) Not currently enrolled in high school
- 3) Willing to participate in all aspects of the program

What is the time commitment?

4:30-6:30 PM on each of the below dates (except for Orientation on 2/23, which will be 4:30-5:30 PM):

Feb/March: Orientation/Phase 1	April: Phase 2	May/June: Phase 3
2/23: Orientation	4/6: Life Management	5/11: Career Exploration
3/6: Self Determination/Advocacy	4/13: Life Management	5/18: Career Exploration
3/9: Self Determination/Advocacy	4/20: Life Management	5/25: Career Exploration
3/16: Self Determination/Advocacy	4/27: Life Management	6/1: Closing
3/23: Self Determination/Advocacy		

What is the cost?

The Thrive Program is funded by the New Mexico Department of Health. There is no cost for participants.

Where and when can I apply?

Applications can be emailed now to Somer Wright SDWright@salud.unm.edu, by **Friday, February 5th, 2021**.



CENTER FOR DEVELOPMENT & DISABILITY

Applicant's Name: _____ DOB: _____ Gender: _____
Last First Middle Initial

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Home #: _____ Cell #: _____ Work #: _____

Occupation, if applicable: _____

- Recent HS Graduate
- College Student
- Seeking Employment
- Other

DEMOGRAPHIC INFORMATION (Optional)

Ethnicity:

Do you consider yourself to be Hispanic/Latino(a)? Yes No

Race:

Please check which best describes your race

- American Indian or Alaskan Native
- Black/African American
- Caucasian/White
- Asian
- Native Hawaiian/Pacific Islander
- Bi-racial/Multi-racial

Emergency Contact: _____ Phone #: _____

Relation to Participant: _____

If other than the applicant, who is filling out this application? _____

Education – High School and Beyond

Years	School/City	Major Subjects	Diploma/ Degree

Employment History:



**CENTER FOR
DEVELOPMENT
& DISABILITY**

What do you hope to gain from participation in the Thrive Program?

What kind of work do you like?

Do you have special skills or training in specific interests? (Computer expertise, sign language, musical instrument, etc.)

Please list involvement in organizations in your community:

So that we can tailor these courses to the students involved, please tell us about your strengths and challenges:

Is there anything else that is important for us to know about you?

Will you commit to attending for all of the dates and times listed on page one under "Time Commitment"?

YES

NO

*****MORE INFORMATION ON BACK*****



CENTER FOR
DEVELOPMENT
& DISABILITY

For Assistance with filling out this application, contact Somer Wright

SDWright@salud.unm.edu

RETURN ENTIRE APPLICATION Via Email BY **Friday, February 5th TO:**

Somer Wright at SDWright@salud.unm.edu