



# TigerLIFE

Advocacy • Employability • Independence

*Tiger "Learning Independence, Fostering Employment and Education" (LIFE)*  
The Boot Camp Experience for Independence!

## Application Packet

(revised 4/22/2020)

**Class size is limited, so for priority consideration, please submit completed application by July 1 for Fall term and October 1 for Spring term in order to be considered for acceptance in the upcoming respective classes.  
(These application deadlines have been extended due to COVID 19)**

Mail completed Applications to:

University of Memphis Institute on Disability  
C/o Dr. Chrisann Schiro-Geist  
100 Ball Hall  
University of Memphis  
Memphis, TN 38152

## Application Selection Process

An Application Screening Committee will review applications and select students for admission. Please do not call about the status of your application, as we will not be able to provide this information for you over the phone. You will receive an email or a letter letting you know of your acceptance.

***Note: Due to space limitations, not all applicants who complete the application and meet the criteria for admission can be accommodated in TigerLIFE. However, these students are welcome to reapply.***

For the purposes of this process application, the potential student applying for the TigerLIFE program will be referred to as the applicant. The decision to offer or deny admission to the program will be made by the Admissions Committee in their best judgment and in the best interest of the applicant. Admission will be based on the following criteria:

- Applicants must be between the ages of 18-29 at the start of the program
- The applicant must have a significant cognitive and /or developmental disability that interferes with his/her academic performance
- The applicant must have sufficient emotional and independent stability to participate in all aspects of the TigerLIFE coursework and campus environment
- The applicant should be able to sit through 90 minute courses and function independently for 2-hour blocks of time
- The applicant must demonstrate the ability to accept and follow reasonable rules and behave respectfully towards others.
- The applicant must demonstrate the desire to attend TigerLIFE and adhere to the TigerLIFE policies regarding attendance and participation in the coursework and typical University of Memphis classes.
- The applicant must have the potential to successfully achieve his/her goals within the context of the TigerLIFE program's content and setting
- The applicant must be able to function within groups of peers
- The applicant must NOT demonstrate any physical aggression or violence towards staff or students. Physical violence of any kind is grounds for immediate termination from the program.
- The applicant must be able to walk approximately 3 to 5 miles each school day. Students must provide any mobility assistance required to do this including a personal care assistant.

Please understand that our mission is independent living and workforce training. This is not always an easy undertaking.

Both parents and students need to agree to participate at a level commensurate with our standards. TigerLIFE is not an appropriate learning environment for all people with special needs.

Please complete **ALL** sections of this application. If sections are incomplete, blank or not signed, it may delay processing and ultimately acceptance into the program.

It is acceptable for the applicant to receive assistance, if needed, in completing the application. You may attach additional information and pages for writing space if needed. Some information will be shared with the federal government as a part of UMID's requirement to continue to receive federal funding. Information not directly related to the applicant's receiving funding will be de-identified (i.e. no name, address, SS#, etc. will be shared) for the purposes of reporting aggregate program information. No information will be shared with additional outside agencies unless the applicant provides written consent.

Letters of recommendation from teachers are extremely important, too, as these describe current levels of performance across many areas.

This program is not an accredited college degree program and exiting students will receive a Completion Award along with a personal portfolio, **NOT** a degree from the University of Memphis.

Please email [vkswrt@memphis.edu](mailto:vkswrt@memphis.edu) or call (901) 678-4303 if you have other questions.

**Please send all admissions materials to:**

**University of Memphis Institute on Disability  
C/o Dr. Chrisann Schiro-Geist  
100 Ball Hall  
University of Memphis  
Memphis, TN 38152**

## STUDENT INFORMATION

1. Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_
2. Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_
3. Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
4. Birth date \_\_\_\_\_ Email address \_\_\_\_\_
5. Gender \_\_\_ M \_\_\_ F \_\_\_ Other
6. Ethnicity \_\_\_ Latino \_\_\_ Non-Latino
7. Race \_\_\_ Asian \_\_\_ American Indian or Alaska Native \_\_\_ Black or African-American  
\_\_\_ Native Hawaii or Pacific Islander \_\_\_ White \_\_\_ Unknown

## FAMILY INFORMATION

The applicant lives with: \_\_\_ Both parents \_\_\_ Mother \_\_\_ Father \_\_\_ Guardian(s)  
\_\_\_ Group home (If applicant lives in a group home, please provide the group home name, contact person and contact phone number) \_\_\_\_\_  
\_\_\_ Other (please specify): \_\_\_\_\_

### **Mother/Guardian:**

3. Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_
4. Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_
5. Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
6. Occupation/Employer \_\_\_\_\_ Work Phone \_\_\_\_\_
7. Email address \_\_\_\_\_

### **Father/Guardian:**

9. Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_
10. Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_
11. Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
12. Occupation/Employer \_\_\_\_\_ Work Phone \_\_\_\_\_
13. Email address \_\_\_\_\_

## EDUCATION HISTORY

1. High Schools Attended Include ALL high schools including those you attended after graduation (for example, you attended Avon Lenox after graduating from Whitehaven High School)

(Name, City, State)	Years attended	Reason for Leaving

2. Did you receive a high school special education diploma or equivalent? (Circle one)                      No      Yes

3. From (school and address) \_\_\_\_\_ Date \_\_\_\_\_

4. Have you ever applied to the University of Memphis?      No      Yes

## EMPLOYMENT HISTORY

Note: prior work experience is not a requirement for admission into this program

1.

Name of Employer	Paid or Unpaid	Job Responsibilities	Reason for Leaving	Dates at this Job

2. Is the applicant currently participating in a work experience, paid or unpaid?  
If yes, at which of the above jobs? \_\_\_\_\_

3. Was the applicant ever employed for pay at or above minimum wage prior to entry into the TPSID program? (Y or N)

4. What work experiences does the applicant have an interest in or enjoy? \_\_\_\_\_  
\_\_\_\_\_



## CONSERVATORSHIP

Does the applicant have a conservatorship?

Yes       No

If so, please describe the conservatorship, including the conservatorship classification and what rights are removed and retained by the applicant, (this section MUST be filled out if the applicant has a conservator). Please include information regarding who is designated as the conservator of the applicant, including contact information. (If you have a conservatorship, a copy of the conservatorship document must be submitted.)

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Does the applicant have an alternative to conservatorship, including but not limited to representative payee, durable power of attorney, informed consent, etc.?

Yes       No

If so, please describe.

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**TigerLIFE**  
**Postsecondary Program**  
Release and Exchange of Information Form

The University of Memphis treats and regards all written documentation obtained to verify a disability and plan for appropriate services as well as all documented services and contracts with the Office of Student Disability Services as confidential. This exchange will occur only with your written permission, as given in this document below, and with the understanding that only information necessary for the purposes of accommodation and academic progress will be communicated. The more sources you permit us to contact, the more accurately and efficiently we are able to process this application.

Applicant Name \_\_\_\_\_ SS# \_\_\_\_\_

Please **CHECK ALL BLANK LINES BELOW** in order to provide us with permission to contact the listed outside sources, and then sign where indicated.

I give permission to exchange information about me with the offices/individuals checked below:

- \_\_\_\_\_ School District(s) \_\_\_\_\_ (The applicant's high school district(s))
- \_\_\_\_\_ School Personnel \_\_\_\_\_ (The applicant's past high school(s))
- \_\_\_\_\_ Parents/Guardians
- \_\_\_\_\_ Department of Vocational Rehabilitation Office
- \_\_\_\_\_ Department of Disability and Special Needs Office
- \_\_\_\_\_ Admissions Office
- \_\_\_\_\_ Course Instructors
- \_\_\_\_\_ Financial Aid Office
- \_\_\_\_\_ Bursar's Office
- \_\_\_\_\_ Registrar's Office
- \_\_\_\_\_ Tutor/Mentor

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_





U. S. SOCIAL SECURITY NUMBER

Please provide your social security number.

For Office Use Only

Receipt Number:

FULL LEGAL NAME (Please Print)

LAST FIRST MIDDLE/MAIDEN SUFFIX

PERMANENT HOME ADDRESS (Please Print)

STREET ADDRESS

CITY STATE ZIP COUNTRY

(AREA CODE) PHONE NUMBER TN-COUNTY

BIRTHDATE

(month / day / year)

GENDER

(Check One)

Male

Female

ETHNICITY / RACE

Do you consider yourself to be Hispanic/Latino/Spanish origin?  Yes  No

Please select one or more of the following racial categories to describe yourself:

White  Black or African American  Asian  American Indian  Alaskan Native  Native Hawaiian or Other Pacific Islander

CITIZENSHIP (Check One)

Are you a CITIZEN of the United States?  Yes  No (If no, what is your country of CITIZENSHIP and your VISA type?)

COUNTRY OF CITIZENSHIP

VISA TYPE

EMERGENCY CONTACT INFORMATION (Please Print)

NAME

STREET ADDRESS

CITY STATE ZIP COUNTRY

RELATIONSHIP OPTIONAL (Check One)

Parent  Guardian  Spouse  Other

(AREA CODE) PHONE NUMBER

For what term and year are you applying? (Check One)  Fall  Spring  Summer Year \_\_\_\_\_

NAME OF HIGH SCHOOL

LOCATION (City / State)

What were your dates of attendance? Begin Month / Year \_\_\_\_\_ / \_\_\_\_\_ End (Graduation) Month / Year \_\_\_\_\_ / \_\_\_\_\_

Please print your name as it appears on your high school transcript: \_\_\_\_\_

Was your diploma awarded on the basis of HIGH SCHOOL graduation or the GED test?  High School  GED

If applicable, what date was the GED taken? Month / Year \_\_\_\_\_ / \_\_\_\_\_

Which ENTRANCE EXAM(S) have you taken? (Check One)  ACT  SAT  BOTH  NONE Month / Year \_\_\_\_\_ / \_\_\_\_\_

Have you always lived in Tennessee?  Yes  No If no, when did you move to Tennessee? Month/Year \_\_\_\_/\_\_\_\_

Are you employed? (Check One)  Full-Time  Part-Time  Not Employed  
If employed, please provide:

EMPLOYER NAME

DATES OF EMPLOYMENT

All male citizens of the United States of America between the ages of eighteen (18) and twenty-six (26) must be registered with the Selective Service prior to registering for classes at the University of Memphis. This requirement does not apply to veterans and others exempt by federal law. Have you registered for

Selective Service?  Yes  No  Exempt

Pursuant to the requirements of the College and University Security Information Act, Tenn. Code Ann. Section 49-7-2200, an annual report of security information and statistics is available upon request. Contact the Associate Dean of Students, Office of Student Judicial and Ethical Programs, 105 University Center, the University of Memphis, Memphis, Tennessee 38152-3460, (901) 678-2298 to obtain any or all of the information. All other Student Right to Know information is available online at [www.enrollment.memphis.edu/registrar](http://www.enrollment.memphis.edu/registrar) under the student menu.

I understand that withholding information requested on this application, including attendance at any other institution, or giving false information may make me ineligible for admission to the university or subject to dismissal. I have read this application and certify that the statements I have made on this application are correct and complete, including a report of all college work attempted or completed. In addition to the foregoing, the Tennessee Eligibility Verification for Entitlements Act requires an applicant for in-state tuition or state financial aid to attest under penalty of perjury that he or she is either a United States citizen or alien lawfully present in the United States. By submitting this application, I am attesting that I am either a United States citizen or alien lawfully present in the United States or I am not requesting any state benefits including in-state tuition. I understand that this attestation is required by Tennessee law if I have applied for a state public benefit. I understand that Tennessee law requires me to provide documentation verifying the status indicated above prior to receipt of this state public benefit. I understand that knowingly and willfully making a false, fictitious, or fraudulent statement or representation shall subject me to liability under the Tennessee False Claims Act, Tennessee Code Annotated 4-18-101 et seq. I understand that if I am found to have made a false or misleading statement my admission may be rescinded or I may be disciplined by the college.

X

SIGNATURE

DATE

**DO NOT WRITE BELOW THIS LINE**

**STATEMENT OF PROCEDURE**

All credentials become the property of the University and cannot be forwarded or returned.

**NOTE:** Credentials will be maintained in active files for a 12-month period. After this period credentials will be relegated to inactive status and must be submitted again before an admissions decision can be made.

**Admission Action:**

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

Not Approved: \_\_\_\_\_ Date: \_\_\_\_\_

*The University of Memphis is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools to award bachelor's, first professional, master's, educational specialist's and doctor's degrees.*

*The University of Memphis is one of 45 institutions in the Tennessee Board of Regents system, the sixth largest system of higher education in the nation. The Tennessee Board of Regents is the governing board for this system which is comprised of six universities, 13 two-year colleges and 26 Tennessee Technology centers. The TBR system enrolls more than 80 percent of all Tennessee students attending public institutions of higher education.*

*The University of Memphis offers equal education opportunity to all persons without regard to age, race, religion, sex, creed, color, national origin or disability. The University does not discriminate on these bases in recruitment and admission of students or in the operation of any of its programs and activities, as specified by federal laws and regulations. The designated coordinators for University compliance with section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 are the Vice President for Student Affairs and the Equal Employment Compliance Officer. Information in this document will be provided in alternate format upon request. The University of Memphis is an Equal Opportunity/Affirmative Action university. It is committed to education of a non-racially identifiable student body.*

I understand that withholding information requested on this application, including attendance at any other institution, or giving false information may make me ineligible for admission to the University or subject to dismissal. I have read this application and certify that the statements I have made on this application are correct and complete, including a report of all college work attempted or completed. In addition to the foregoing, the Tennessee Eligibility Verification for Entitlements Act requires an applicant for in-state tuition or state financial aid to attest under penalty of perjury that he or she is either a U.S. citizen or an alien lawfully present in the United States. By submitting this application, I am attesting that I am either a U.S. citizen or an alien lawfully present in the United States or that I am not requesting any state benefits, including in-state tuition. I understand that this attestation is required by Tennessee law if I have applied for a state public benefit. I understand that Tennessee law requires me to provide documentation verifying the status indicated above prior to receipt of this state public benefit. I understand that knowingly and willfully making a false, fictitious or fraudulent statement or representation shall subject me to liability under the Tennessee False Claims Act, Tennessee Code Annotated 4-18-101 et seq. I understand that if I am found to have made a false or misleading statement, my admission may be rescinded or I may be disciplined by the University of Memphis. I grant my high school(s) and college(s) permission to release my transcript(s) to the University of Memphis.

\_\_\_\_\_ Yes    \_\_\_\_\_ No

I certify that none of the information provided on this application is false or has been withheld. I also acknowledge understanding that giving false information or withholding information may make me ineligible for admission to the University of Memphis.

\_\_\_\_\_ Yes    \_\_\_\_\_ No

I understand that the TigerLIFE Admissions Coordinator will use my information on this application to complete the required University of Memphis online application.

\_\_\_\_\_ Yes    \_\_\_\_\_ No

I have read all the information on this page:

Parent Signature: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

## Terms of Application Consideration

Please note the following when filling out your application

- The application will be rejected for nondisclosure or falsification of any relevant information submitted.
- Information collected in this application is maintained in a secure location and is destroyed within 6-months if the student is not accepted for admission.
- If a student is accepted into the program, the information will be maintained in a secure location in accordance with the Family Education Rights and Privacy Act (FERPA). Only de-identified (no personal information) will be reported to sources outside the university (such as the federal government for grant money reporting) unless otherwise permitted by the applicant.
- If the applicant has a history of physical aggression or violence, a psychological evaluation must accompany your application and a decision for admission will be made on a case-by-case basis.
- If the applicant requires the assistance of a personal care giver for basic needs, like using the restroom or pushing a wheelchair, an assistant must accompany them to school every day. **TigerLIFE cannot provide this service.**
- Students participate in various activities throughout the semester. TigerLIFE staff reserve the right to evaluate students on their ability to travel independently, and based on that evaluation, allow or restrict travel options to these events based on the personal ability levels of the students involved.
- TigerLIFE students must adhere to the University of Memphis Code of Student Rights and Responsibilities. Failure to adhere to the guidelines set forth in this document will result in disciplinary action, including suspension and/or termination from the TigerLIFE program and expulsion from the University of Memphis.
- TigerLIFE takes no actions or responsibilities whatsoever for actions or activities that take place online and on social media, with the exception of threats of physical injury. Any threats of harm will be turned over to the University police force for investigation.
- TigerLIFE students must adhere to the University of Memphis academic integrity policy, as outlined in the Code of Student Rights and Responsibilities.

***TigerLIFE reserves the right to amend this agreement during the semester as needed, with advance notice given to parents/guardians and students.***

By signing this page, I certify that I have read, understand, and agree to the Terms of Application Consideration

By signing this page, I certify that I have read and understand that withholding information requested on this application or giving false information may make me ineligible for admission to the university or subject to dismissal.

By signing this page, I certify that the statements I have made on this application are correct and complete.

Applicant Signature

\_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_ Date \_\_\_\_\_