



# RISE

Raise Individual Student Expectations



RISE is a secondary transitional preparatory program for students on a current Individualized Education Program (IEP)

[www.indianhills.edu/rise](http://www.indianhills.edu/rise)



## ***RISE/IHCC Packet Enclosures***

- ☐ RISE Referral Guidelines
- ☐ RISE Referral Process for IEP teams
- ☐ New Student Checklist

### ***RISE Referral Guidelines***

#### **PROGRAM DESCRIPTION**

RISE is a 4+ program located at Indian Hills Community College. In conjunction with the student's high school, Indian Hills will continue to provide special education services to fulfill unmet transition needs as identified in the student's IEP.

#### **CRITERIA FOR ENROLLMENT**

- Enrolled in a high school special education program.
- Have unmet transition needs, as identified by the IEP team.
  - Use the 4+ Transition Rubric for guidance.
- Between the ages of 16 and 21.
- Show desire and motivation to cooperate and communicate with RISE staff.
- Have met high school graduation requirements.

#### **SUGGESTED CRITERIA FOR ENROLLMENT**

- Socially responsible behavior.
- Maintains district attendance standard of 95% or better.
- No inappropriate contact with students or staff. Follows the student code of conduct.
- A minimum grade point average of 2.0 has been achieved or shows academic potential.

#### ***Contact***

Lisa Washington, Student Academic  
Access Coordinator  
800-726-2585, Ext. 5749  
lisa.washington@indianhills.edu

#### ***Schedule a Visit Today!***

[www.indianhills.edu/rise](http://www.indianhills.edu/rise)

# ***RISE Referral Process***

## **RISE Procedures for IEP Teams**

Identification of a potential RISE candidate should take place, at a minimum, during the junior year. The transition discussion should begin as early as age 14. Referral to the RISE program is a team decision and not an individual recommendation.

## **Referral Procedures**

- 1) The IEP team should complete a reevaluation during the student's senior year to determine if the student continues to be eligible for special education services or not. If not, the student is exited and does not qualify for 4+ services. If the student does remain eligible, then the team should identify the student's needs, specifically those needs within the IEP, and discuss the placement options to meet those needs.
- 2) It is suggested that the student visit the RISE program before a referral is made. Visit the IHCC website to attend a College Transition Day. [www.indianhills.edu/rise](http://www.indianhills.edu/rise)
- 3) If RISE is determined as a viable option;
  - a. Complete the RISE referral form and return to [lisa.washington@indianhills.edu](mailto:lisa.washington@indianhills.edu)
  - b. Invite a RISE Representative to the IEP staffing. This staffing should take place the final semester before attending RISE
  - c. Submit RISE packet by appropriate deadline.

## **IEP Procedures**

- 1) Page "I" should include the following information;
  - a. Vocational Rehabilitation information
  - b. Accuplacer or ACT scores
  - c. Recent goals in IEP
  - d. Any health issues
  - e. Any behavior issues
  - f. Plans for living and/or transportation
  - g. Other information that may be relevant, but not included in their IEP.
- 2) Page B should include the following information;
  - a. Post-Secondary expectation for living, learning and working

All steps must be completed and submitted before a student referral will be accepted. Send all referral information to Lisa Washington, Student Academic Access Coordinator, by the following deadlines.

- April 1 (Fall start)
- December 1 (Winter start)

Indian Hills Community College  
Attn: Lisa Washington  
525 Grandview Avenue  
Ottumwa, IA 52501

Or

[lisa.washington@indianhills.edu](mailto:lisa.washington@indianhills.edu)

For questions contact your AEA Consultant or call the RISE office at 1-800-726-2585 ext. 5226

# ***RISE/IHCC Referral***

(to be completed by a special education teacher)

Student \_\_\_\_\_ Date \_\_\_\_\_

## **DISTRICT INFORMATION**

High School \_\_\_\_\_

IEP Teacher \_\_\_\_\_ Email \_\_\_\_\_

Name of District Administrator \_\_\_\_\_  
Approving referral: \_\_\_\_\_ Date: \_\_\_\_\_

Is the student open enrolled from another school district?      yes ☐      no ☐

If yes, which district? \_\_\_\_\_

If yes, name of district Administrator \_\_\_\_\_  
Approving Referral: \_\_\_\_\_ Date: \_\_\_\_\_

## **ATTENDANCE & ACADEMIC HISTORY**

Total Absences: \_\_\_\_\_  
Senior Year \_\_\_\_\_ (as of \_\_\_\_\_)      Junior Year \_\_\_\_\_      Sophomore Year \_\_\_\_\_  
Current Cumulative GPA: \_\_\_\_\_  
Explanation of Excessive Absences or Tardiness: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **VOCATIONAL REHABILITATION**

Does the student have a file with Vocational Rehabilitation?      yes ☐      no ☐

## **IEP INFORMATION**

Reevaluation Date: \_\_\_\_\_ Consultant: \_\_\_\_\_

Areas of Academic Need:  
Math ☐      Reading Comprehension ☐      Written Expression ☐      Other (explain below) ☐  
Transition Needs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Accommodations: Please list all accommodations student is currently using:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Continued on next page)*

(IEP Information continued)

Student Transportation:

The sponsoring district will provide transportation in the following manner:

- ☐ School Bus or Van  
☐ City Bus Pass  
☐ Mileage Reimbursement  
☐ IHCC Housing  
☐ Other \_\_\_\_\_

The sponsoring district will provide a laptop computer: ☐ Yes ☐ No

Assistive Technology (specify): \_\_\_\_\_

\_\_\_\_\_

## REFERRAL APPROVAL

I certify that my answers are true and complete to the best of my knowledge

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Administration Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## APPLICATION DEADLINE

RISE applications must be received prior to the appropriate deadline listed on page three.

Return to:

**Indian Hills Community College**  
**Lisa Washington**  
525 Grandview Ave  
Ottumwa, Iowa 52501

It is the policy of Indian Hills Community College not to discriminate on the basis of race, color, national origin, sex, disability, age (employment), sexual orientation, gender identity, creed, religion, and actual or potential parental, family, or marital status in its programs, activities, or employment practices as required by the Iowa Code §§216.6 and 216.9, Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. §§ 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C §§ 1681 – 1688), Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and Title II of the Americans with Disabilities Act (42 U.S.C. § 12101, et seq.).

If you have questions or complaints related to compliance with this policy, please contact Associate Dean, Student Development, 525 Grandview Ave, Ottumwa, IA 52501, (641) 683-5155, equity@indianhills.edu (students, faculty and staff); Executive Dean, Centerville Campus & Learning Services, 683-5174, learningservicesequity@indianhills.edu (students with disabilities); U.S. Department of Education, Citigroup Center, 500 W. Madison, Suite 1475, Chicago, IL 60661, phone number (312) 730-1560, fax (312) 730- 1576.



# ***New Student Checklist***

(to be completed by the student)

The following information/steps should be completed by the prospective student.

- ☐ Student Profile
- ☐ Complete the college entrance exam
  - ☐ The exam is available on the Ottumwa Campus, Centerville Campus, or any of the IHCC service centers.
  - ☐ A photo ID and social security number are required to take the exam. Call (641) 683-5142 for more information.
- ☐ Send high school transcripts to IHCC — Indian Hills Community College  
ATTN: Registrar  
525 Grandview Ave.  
Ottumwa, IA 52501
- ☐ Complete all IHCC program entry requirements. See specific IHCC program information for details.  
Students will not be accepted into an IHCC program until all requirements are met.
- ☐ Review and sign the RISE Attendance Policy.
- ☐ Review and sign the RISE IHCC Student Conduct.
- ☐ Review and sign the Student Disability Services Release of Confidential Information.
- ☐ Complete IHCC Application form (must be completed paper copy, not online)
  - ☐ If already completed online, make notation here.
- ☐ After acceptance, students will receive a detailed letter with information on class registration and orientations.

**Note:** If a student is unable to attend IHCC/RISE, he/she must notify IHCC, RISE, and his/her high school.

**Additional Information:** Students in the RISE program do not qualify for financial aid and should not complete the FAFSA. RISE students are still considered high school students and their diploma will be held by the district until the student has exited from special education services.

It is the responsibility of the student to contact IHCC and RISE if their phone number, mailing address, and or email address changes any time after application materials have been submitted. Contact RISE at 800.726.2585, ext. 5226, for additional information.

# Student Profile

Program of Study: \_\_\_\_\_

## Student

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN# \_\_\_\_\_

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

## Parent / Guardian

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

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

## Parent / Guardian

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

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

## Special Needs / Concerns



## ***RISE Attendance Policy***

- A total of three absences will be accepted during any given term (12-week period). Upon the fourth absence, an IEP meeting will be held to decide what action will be taken.
- Tardiness will not be tolerated. Three individual tardies will count as one missed class. Three individually missed classes will result in a day's absence.
- RISE students follow the IHCC scheduling, including weather delays or cancellations. If a student's family feels it is unsafe for him/her to travel, the student must notify all of the teachers of classes that will be missed. The student is responsible to make up all missed work.
- RISE is a closed campus program. The student's family assumes all responsibility and liability when the student is not in educational programming and if the student leaves the campus.

**I HAVE READ AND UNDERSTAND THE ABOVE POLICY.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

## ***RISE/IHCC Student Code of Conduct***

Indian Hills Community College is an academic community built on the principles of mutual respect, integrity, and honesty. The college strives to provide a community wherein individuals have the right to express their opinions and ideas, to assemble peacefully, and to associate freely in a manner that does not interfere with the rights of others and is in the confines of intellectual honesty. In order to thrive as an educational institution, the college has adopted this Student Conduct Code ("Student Code") to promote and preserve its educational mission for the benefit of all who are invited to be a part of the community.

Please read the Student Conduct Code at [www.indianhills.edu/studentconduct](http://www.indianhills.edu/studentconduct)

The IEP team reserves the right to exit the student from special education services and the RISE program, if deemed appropriate, due to misconduct and/or failing to maintain attendance and/or educational standards.

**I HAVE READ AND UNDERSTAND THE ABOVE POLICY.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

# ***Student Disability Services Release of Confidential Information***

Student's Name: \_\_\_\_\_

Student's ID Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## **Permission for IHCC Instructors/Professors & Appropriate Staff**

I hereby give permission to the IHCC Student Academic Access Coordinators to release confidential information from my file in order to set up classroom accommodations and/or services connected to accessibility and my specific disability. I understand that I must provide the required documentation of my disability in order to receive accommodations and services.

Please select one:

- ☐ I give my permission  
☐ I do not give my permission

## **Permission for Family, Agencies, and Others**

I hereby give permission to the IHCC Disability Services office and the named individuals/agencies below to release and/or exchange confidential information on my behalf.

Please select all that apply:

- ☐ Parents/Guardians  
☐ Vocational Rehabilitation Counselor  
☐ Job Corps  
☐ Other \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

# Application for Admission

## PERSONAL DATA

Legal Name \_\_\_\_\_  
Last First Middle Maiden Former

\*Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

(IRS regulations require Indian Hills Community College to request a SSN as a Taxpayer ID number for use in tax reporting. Any student applying for Financial Aid (grants and loans) must provide a social security number to Indian Hills Community College.)

Mailing Address \_\_\_\_\_  
House No Street Box Apt No  
City State Zip County

Primary Phone ( ) - \_\_\_\_\_ Accepts Texts Email Address \_\_\_\_\_  
Secondary Phone ( ) - \_\_\_\_\_ Accepts Texts

Birth Date (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: Male Female

### Ethnic Background:

Are you Hispanic or Latino? ☐ Yes ☐ No

Select one or more races: ☐ (AM) Amer Indian/Alaskan Native (HP) Native Hawaiian/or other Pacific Islander  
☐ (AS) Asian (WH) White (not Hispanic)  
☐ (BL) Black/African American

Will you be receiving assistance from the Veterans Administration Yes No

I am required to register as a sex offender ☐ Yes ☐ No

## ACADEMIC INFORMATION

Start Term (check one only) ☐ FALL WINTER SPRING SUMMER

Start Year \_\_\_\_\_

Program of Study \_\_\_\_\_ ☐ Ottumwa ☐ Centerville

\*\*\*All programs and start terms offered are listed on back of application

### Admit Status

After leaving IHCC, do you plan to:

1. Prepare to enter the job market
2. Improve skills for present job
3. Prepare to change careers
4. Meet certification/licensure requirements (other than for initial job entry)
5. Transfer to another college/university
6. Explore courses to decide on a career
7. Self Improvement/Improve basic skills
8. Personal Interest
9. Undecided/Unknown

### Educational Goals (check one only)

Degree Seeking (plan to pursue a degree or diploma)

Non Degree Seeking (do not plan to pursue a degree or diploma)

## RESIDENCY INFORMATION

How long have you resided Iowa?

1. I don't live in Iowa
2. Less than 90 days
3. I was born in Iowa
4. More than 90 days

What brought you to Iowa?

1. I came to Iowa to attend college
2. I was born in Iowa
3. I don't live in Iowa
4. I relocated for family or work

Are you a U.S. Citizen? ☐ Yes ☐ No

If you are not a U.S. citizen, are you a permanent resident of the U.S.? ☐ Yes ☐ No

For information on campus housing, please contact the housing office at (641) 683-5152 or (800) 726-2585, extension 5152.

## **EDUCATION INFORMATION**

All transcripts submitted become the property of IHCC and cannot be returned or sent to another institution. Please submit a copy of your high school transcript or High School Equivalency Diploma to the Admissions Office. Please submit all college transcript(s) to the Registrar's Office.

High School Attended \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

☐ Currently in High School - Anticipation Graduation: (month) \_\_\_\_\_ (year) \_\_\_\_\_

Have you attended another college other than Indian Hills? ☐ Yes ☐ No If yes, how many \_\_\_\_\_

## **FAMILY BACKGROUND DATA**

Did either of your parents (or guardians) receive a four-year college degree? ☐ Yes ☐ No

If yes, select all that apply: ☐ Father ☐ Mother ☐ Guardian

## **CERTIFICATION**

I certify that all information contained in this application is factually correct and complete. I understand that it is my responsibility to request official transcripts be sent to Indian Hills Community College from each academic institution I have attended. I also understand that the misrepresentation or omission of application information is sufficient grounds for canceling my admission or registration.

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

## **COLLEGE ADDRESSES**

Office of Admission, Indian Hills Community College, 525 Grandview Avenue, Ottumwa, IA 52501.

Phone: (641) 683-5153 or (800) 726-2585, ext. 5153. No Application Fee

Office of Admission, Indian Hills Community College, 721 North First St., Centerville, IA 52544.

Phone: (641) 856-2143 or (800) 670-3641, ext. 2225. No Application Fee

# IHCC Credit Program Offerings

## ARTS & SCIENCES DIVISION

Program	Loc.	Term	Mo.	Degree
Arts & Sciences	Cen	All	18	AA
Arts & Sciences	Ott	All	18	AA
Arts & Sciences Graduate	Ott	All		
Arts & Sciences in Agriculture Education	Cen	All	18	AA
Arts & Sciences in Agronomy	Cen	All	18	AS
Arts & Sciences in Animal Science	Cen	All	18	AS
Arts & Sciences in Biology	Ott	All	18	AS
Arts & Sciences in Business	Cen	All	18	AA
Arts & Sciences in Business	Ott	All	18	AA
Arts & Sciences in Chemistry	Cen	All	18	AS
Arts & Sciences in Chemistry	Ott	All	18	AS
Arts & Sciences in Communications	Cen	All	18	AA
Arts & Sciences in Communications	Ott	All	18	AA
*Arts & Sciences in Criminal Justice	Ott	All	18	AA
*Arts & Sciences in Early Childhood Teaching	Cen	All	18	AA
*Arts & Sciences in Early Childhood Teaching	Ott	All	18	AA
*Arts & Sciences in Elementary Education	Cen	All	18	AA
*Arts & Sciences in Elementary Education	Ott	All	18	AA
Arts & Sciences in Fine Arts	Cen	All	18	AA
Arts & Sciences in Fine Arts	Ott	All	18	AA
Arts & Sciences in Mathematics	Ott	All	18	AS
Arts & Sciences in Physics	Ott	All	18	AS
Arts & Sciences in Psychology	Ott	All	18	AA
*Arts & Sciences in Secondary Education	Cen	All	18	AA
*Arts & Sciences in Secondary Education	Ott	All	18	AA
Arts & Sciences in Sociology	Cen	All	18	AA
Arts & Sciences in Sociology	Ott	All	18	AA
Arts & Sciences in Theater	Ott	All	18	AA
Arts & Sciences - Online	Online	All	18	AA
Arts & Sciences - Pre-Health	Cen	All		
Arts & Sciences - Pre-Health	Ott	All		
*Criminal Justice	Ott	F/Sp/Su	21	AAS
Culinary Arts	Ott	F	21	AAS
ESL	Ott	F/W/Sp		
Guest Student	Ott	All		
Hotel & Restaurant Management	Ott	F	21	AAS

\*Screened program - students will need to pass a background check prior to acceptance

Updated 3/20

## ADVANCED TECHNOLOGY DIVISION

Agriculture/Grounds	Loc	Term	Mo.	Degree
Animal Science	Cen	All	21	AAS
Landscape & Turfgrass Technology	Cen	All	21	AAS
Precision Farming	Cen	All	21	AAS
<b>Information Technology</b>				
Accounting Assistant	Ott	All	12	Dip
Business Specialist - (Centerville)	Cen	All	9	Dip
Business Specialist	Ott	All	9	Dip
Business Specialist - Accounting	Ott	All	18	AAS
Business Specialist - Office Mgt	Ott	All	18	AAS
Computer Accounting	Ott	All	6	Dip
Computer Software Development	Ott	All	21	AAS
Cybersecurity and Systems Administration	Ott	F/Sp	21	AAS
Geospatial Technology	Ott	F/Su	18	AAS
Interactive Media Technology	Ott	F/Su	21	AAS
<b>Manufacturing</b>				
Agricultural/Biofuels Process Technology	Ott/Eddyv	F	21	AAS
Bio-Manufacturing	Ott/Eddyv	F	9	Dip
Construction Technology	Cen	All	24	AAS
Electrical & Renewable Energy	Ott	F	24	AAS
Electronic Engineering Technology	Ott	F/Sp	21	AAS
HVAC and Refrigeration	Ott	F/Sp	6	Dip
Industrial Maintenance	Ott	F/Sp	18	AAS
Industrial Maintenance Technician	Ott	F/Sp	9	Dip
Laser & Optics Technology	Ott	F/Sp	21	AAS
Machine Technology	Ott	All	18	AAS
Process Control	Ott	F	9	Dip
Robotics/Automation Technology	Ott	F/Sp	21	AAS
Welding Technology	Ott	F/Sp	18	AAS
Welding Technology	Ott	F/Sp	12	Dip
<b>Transportation</b>				
Automotive Technology	Ott	F/Sp	21	AAS
Aviation Maintenance Technology	Ott	F	21	AAS
Avionics Electronic Technician	Ott	Su	9	Dip
Diesel Technology	Ott	F/Sp	21	AAS

Updated 7/19

F = Fall

W= Winter

SP = Spring

SU = Summer

A = All

# IHCC Credit Program Offerings

## HEALTH SCIENCES DIVISION

Program	Loc.	Term	Mo.	Degree
Arts & Sciences – Pre-Health	Ott			
Arts & Sciences – Pre-Health	Cen			
Child Care Technician	Ott	F/W	12	Dip
Clinical Laboratory Assistant	Ott	F	9	Dip
Dental Assisting	Ott	F	12	Dip
Dental Hygiene	Ott	F	24	AAS
Early Childhood Associate	Ott	F/W	21	AAS
Health Information Technology	Online	F/Sp	21	AAS
Health Unit Coordinator	Online	F	6	Dip
Medical/Insurance Coding	Online	F/Sp	12	Dip
Medical Laboratory Technology	Ott	Su	24	AAS
Medical Scribe	Online	F/Sp	12	Dip
Nursing – Associate (Day – 2nd year)	Ott	W/Su	12	AAS
Nursing – Associate (Day – 2nd year)	Cen	Su	12	AAS
Nursing – Associate (Day – both years)	Ott	W/Su	24	AAS
**Nursing – Associate (Hybrid – 2nd year)	Online/Ott	W	21	AAS
Nursing – Practical (Day – 1st year)	Ott	W/Su	12	Dip
Nursing – Practical (Day – 1st year)	Cent	Su	12	Dip
Nutrition & Dietary Management	Ott	F	18	AAS
Occupational Therapy Assistant	Ott	F	21	AAS
Paramedic	Ott	F/Sp	24	AAS
Paramedic Core	Ott	W/Su	21	Dip
Physical Therapist Assistant	Ott	F	21	AAS
Radiologic Technology	Ott	F	24	AAS
Surgical Tech (Co-op w/Kirkwood CC)	Ott	F	12	Dip

## CERTIFICATE PROGRAMS

(not eligible for Title IV Funding)

Advanced Emergency Medical Tech	Ott	F	6	Cert
Emergency Medical Responder (Eve)	Ott	W	3	Cert
Emergency Medical Technician	Cen	F/Sp	6	Cert
Emergency Medical Technician	Ott	F/Sp	6	Cert
Phlebotomy Technician	Ott	W	6	Cert

\*\*Temporarily not available  
Updated 2/20

F = Fall      W= Winter      SP = Spring      SU = Summer      A = All



# ***RISE***

Raise Individual Student Expectations

Lisa Washington  
Student Academic Access Coordinator  
525 Grandview Ave  
Ottumwa, IA 52501  
800-726-2585, ext. 5749  
RISE Classroom (641) 683-5226  
[lisa.washington@indianhills.edu](mailto:lisa.washington@indianhills.edu)



*Life. Changing.*

