



Naperville North High School

899 North Mill Street
Naperville, Illinois 60563

TO: NNHS Parents/Guardians

RE: Application for Department of Human/Rehabilitation Services (DHS/DRS)

As part of your student's transition process, we would like to offer him/her the opportunity to apply to participate in DRS's Division of Rehabilitation Services (DRS). DRS is the state's lead agency serving individuals with disabilities (IEP or 504 plan). DRS works in partnership with people with disabilities and their families to assist them in making informed choices to achieve full community participation through employment and education or training opportunities. Students that will benefit from services for employment or education/training may begin the application process here at NNHS. The state provides various services, college/training financial contribution, and employment assistance. If seeking educational assistance, students will need to provide a letter of acceptance into an approved training/trade program or college/university (see attached list of documents).

Naperville North and Naperville Central will be holding virtual informational sessions in the spring with the DRS Representative. For students with an IEP, after submitting, the signed release of records to me, the student's IEP, signed consent forms, and referral forms are submitted to our DRS counselor. She reviews the information and meets with the student and parents (if available) to discuss his/her needs, skills, and plans for education/training and their end goal of chosen employment. Once the required documents are received by DRS (deadline June 30th), the counselor processes the referral and develops the student's individual employment plan (IEP). Upon graduation, any additional meetings are at the Downers Grove DRS office. Students with a 504 plan are processed differently and should utilize the following [self-referral link](#) per DRS.

To begin the process you will need to sign the District 203 Authorization for Release of Special Education Information, DRS Referral Form, and DRS Consent for Services Form (if the student is under 18 years of age) and the Privacy Policy Form. We will compile and submit the components needed for the referral with the DRS counselor. Note the Privacy Policy states that DRS will use the student's IEP for providing services to the student. In addition, the student's SSN is used to enter the referral into the state site for providing any services and funding.

If you have any questions or concerns regarding this process, please call me at 630-420-5683 or email me at dmrozinski@naperville203.org.

Debrah H. Mrozinski

Naperville North High School
Learning Behavioral Specialist I
899 N. Mill Street
Naperville, IL 60563-8998
Office: (630) 848-5683
dmrozinski@naperville203.org

What is the Department of Rehabilitation Services (DRS)?

- DHS's Division of Rehabilitation Services is the state's lead agency serving individuals with disabilities. DRS works in partnership with people with disabilities and their families to assist them in making informed choices to achieve full community participation through employment, education, and independent living opportunities

Who is eligible for DRS services?

- All students with a documented disability receiving services outlined in an IEP or a 504 Plan. (*Per DRS, students with a 504 plan use the self-referral link below*)
- Students who plan on attending college or a vocational/trade school or program
- Students who will need assistance finding and keeping a job in the future

What services can DRS offer to students who are attending college or trade school next year?

- Financial assistance with college/trade school*
 - Able to provide financial assistance for trade school, community college, and (in some cases) 4-year universities → Students **must** have identified a program of study
**DRS requires FAFSA to be completed by all clients*
Financial assistance from DRS is **not always influenced by parental income*
- Can assist individuals to find a job in their field of interest/study following graduation

Stipulations for Continued Financial Aid:

- Must maintain a GPA of 2.0 or better (if GPA goes lower, person is determined ineligible)
- Will not pay for retakes for classes that are failed
- 3 years to complete a 2 year program and 5 years to complete a 4 year program
- Must be students seeking a degree or certification, not remedial classes or “trials”
- Students must have identified program of study before DRS will assist financially
- Grades, schedule, and tuition bill must be submitted at the end of each semester

DRS Informational Meetings:

- DRS Counselor will be coming to NNHS in the spring to hold informational meetings (pending COVID restrictions) for students and families. If necessary virtual meetings will be arranged. All referral and intake meetings after graduation will be taking place at the DRS Downers Grove office based on their procedures at that time.

Downers Grove DRS Office

Rehabilitation Services

2901 Finley Road, Suite 109

Downers Grove, IL 60515

Phone: (630) 495-0500

(For self-referral after high school and students with a 504 plan)

Referral Link: <https://wr.dhs.illinois.gov/wrpublic/wr/dynamic/referral.jsf>

Department of Rehabilitation Services -- Required Documentation

The following documents are needed if you plan to attend college after graduation:

1. Proof of FAFSA Application (*Approval or Denial*)
2. Financial Aid Letter (*Approval or Denial*)
3. High School Diploma **and** Final Transcript
4. College/University Acceptance Letter
5. Identified Program of Study
6. Bill Showing Tuition and Fees
7. Bill Showing Room and Board Cost (*if applicable*)
8. Class Schedule (*Fall Semester*)
9. Textbook List and Prices (*without taxes*)
10. Technology Assessments and Other Evaluations (*for students requiring assistive technology devices*)
11. Documentation of Disability (*copy of the most recent IEP and Reevaluation*)
12. Social Security Information (*if applicable*)
13. Family Federal Tax Return Documents (prior year)

****At the intake meeting at DRS, Downers Grove, students will need to bring State ID/Driver's License and Social Security Card****

****These items/documents are required to be submitted to Abiola at DRS by June 30th****



Risikat Abiola Akinmolayan, M.A.
Senior Rehabilitation Counselor
Illinois Department of Human Services
Division of Rehabilitation Services
2901 Finley Road, Suite #109
Downers Grove, IL 60515
Telephone # (630) 495-0500 Fax # (630) 495-4841
E-Mail: Risikat.Akinmolayan@illinois.gov



Illinois Department of Human Services

JB Pritzker, Governor

Grace B Hou, Secretary

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2901 Finley Road, Suite #109
Downers Grove, IL 60515
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College Training / Customer

1. Description of your vocational goal and how college training will prepare you for this goal. Description of your academic qualifications and the degree to which you are likely to benefit from college and obtain a degree within the three to six-year time.
2. Description of your current level of education (high school transcript after graduating) and previous college training, if any. Include information on course grades from any previous college of study.
3. Academic qualifications described in detail for your college training. Include a description of grades and other indicators of standard college tests such as the ACT and SAT. Any special academic honors or scholarships should be noted.
4. The college you intend to enroll in and describe your expected course of study in college. Provide documentation that the college has accepted you.
5. Provide financial information as it relates to college training, including the results of your application for Financial Aid. This must include a letter from the college with the financial aid amounts, if any, including Pell and MAP Awards.
6. Describe your vocational goal and how college training will result in the achievement of your employment goal.

These questions must be completed with counselor during interview or sent to the counselor for approval before the customer starts the college semester.



DHS: Rehabilitation Services: Referral and Application

Last Name:			
First Name:			
Middle Initial:		Gender:	
Other Program Code:		Medicaid Recipient	(Y) (N)
Veteran:	(Y) or (N)	Migrant Worker	(Y) (N)
Reason for Referral:	College / Career Training		
Disability:			
Social Security Number:			
Age/Date of Birth:			
Address:			
County:			
Phone Number:			
Contact (cell or home)			
Email Address:			
Referral Service		Naperville North High School	
		Debrah Mrozinski	
		(630) 848-5683	
		dmrozinski@naperville203.org	
Accommodations or Language needs:			



State of Illinois
Department of Human Services- Division of Rehabilitation Services
Consent For Services (if under age 18)

I hereby give consent (permission) for _____ to receive and participate in vocational rehabilitation services that will lead to employment.

(Parent or Guardian Signature)

(Date)



Christine Igoe
Assistant Superintendent
for Student Services

Administrative Center

203 W Hillside
Road

Naperville, IL
60540-6589

630-420-6465 FAX:630-420-6566

AUTHORIZATION FOR RELEASE/EXCHANGE OF INFORMATION

I/we hereby authorize the exchange of communications and the release/exchange of the following records concerning

_____ (student's name)

_____ (birthdate)

between **Naperville School District 203** agents and employees and:

Name/Title: Risikat Abiola Akinmolayan, M.A.

Agency/Organization: Illinois Division of Rehabilitation Services

Address: 2901 Finley Road, Suite #109, Downers Grove, IL 60515

Telephone: 630-495-0500

E-mail: Risikat.Akinmolayan@illinois.gov

The following information will be released/exchanged:

- All permanent records (including, but not limited to, basic identifying information, academic transcript, attendance records, health records and scores received on all State assessments administered in grades 9-12, where applicable)
- All temporary records (including, but not limited to, scores on State assessments administered in grades K-8, discipline records, health-related information, accident reports, aptitude and achievement test results, report cards, progress monitoring information, special education records, and Section 504 records)
- All IEP/special education and/or Section 504 records
- Other (specify): Communication

These disclosures are authorized pursuant to 20 U.S.C. Section 1232g, 105 ILCS 10/1 et seq., and 740 ILCS 110/1 et seq.,* and are to be made for the purpose of:

- Educational evaluation and/or planning
- Other (specify): _____

I understand that I have the right to inspect and copy the information to be disclosed, challenge its contents, and limit my consent to designated records or portions of the information contained in those records. I also understand that my refusal to consent to the exchange of records and communications could result in incomplete and/or inappropriate educational planning for the student. This consent expires one year from the date indicated below. However, I understand that I have the right to revoke this consent in writing at any time.

PARENT/GUARDIAN SIGNATURE

DATE

WITNESS SIGNATURE (for mental health/
developmental disability records)

DATE

STUDENT SIGNATURE (for mental health/
developmental disability records, if student is age 12 or older)

DATE

* **NOTE: Prior to the release of protected health information, health care providers may require the parent/guardian to execute an additional authorization form to comply with the Health Insurance Portability and Accountability Act (AHIPAA@).**

SEND RECORDS TO:

District 203 School

Naperville North High School

District 203 Address

899 North Mill Street

Naperville, IL 60563-8998