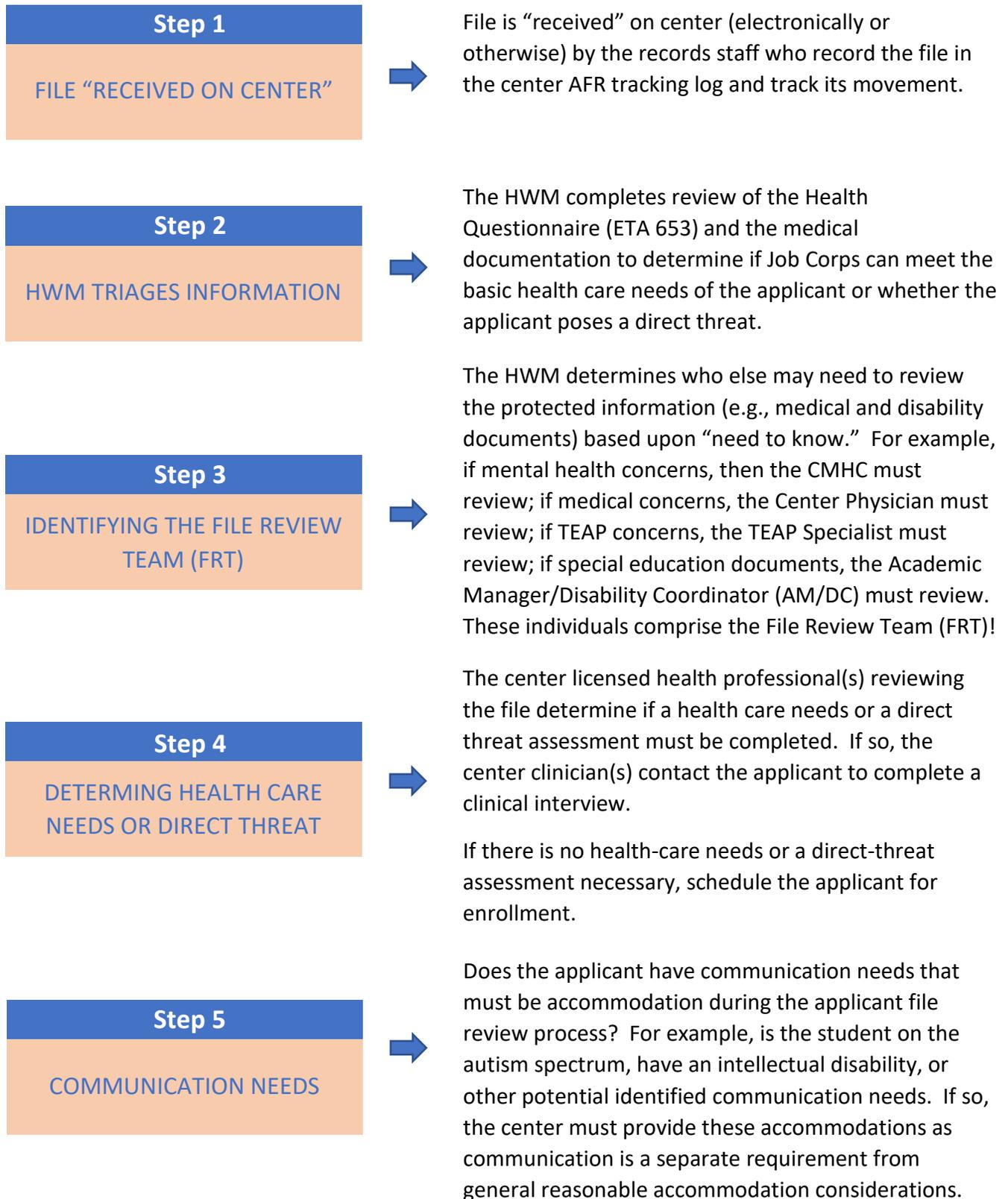
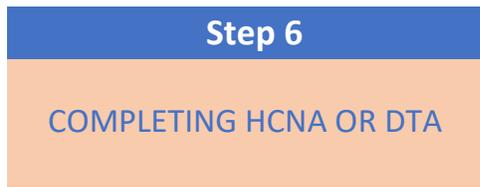


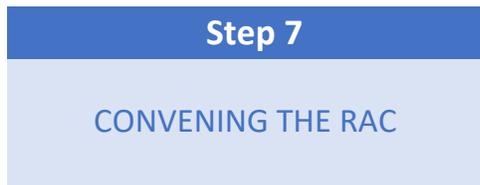
# Center Applicant File Review Process

## Applicant with a Disability – Unable to Identify Accommodations





If the center licensed health professional reviewing the file and conducting the clinical interview with the applicant determines that there are health care needs that exceed those of basic care or the applicant poses a direct threat, s/he completes either the Health Care Needs Assessment found in Form 2-05 or a Direct Threat Assessment found in Form 2-04 of the PRH.



If the applicant is a person with a disability, the reasonable accommodation committee (RAC) led by the DC must convene and consider accommodations. To do this, look at the functional limitations in item #3 of the HCNA, for example, and then look at the same categories in item #5 (the reasonable accommodation section) and identify accommodations that support the identified functional limitations. You are not limited to the accommodations in the list and may add more in the OTHER” section. If the RAC is unable to identify accommodations, please see the Information Box below entitled: *Unable to Identify Accommodations*.

### UNABLE TO IDENTIFY ACCOMMODATIONS

Being “unable to ID reasonable accommodation” occurs infrequently and applies to more extreme-type scenarios. For example:

- Applicant is experiencing active symptoms (e.g., hallucinations, delusions, etc.) that would preclude them from being able to make decisions related to accommodations, etc. during the RAC interview.
- The applicant has an extensive hx of serious self-harm attempts, perhaps that have been escalating in seriousness and frequency over time or a very serious incident just recently occurred.
- The applicant has an extensive hx of assaultive or violent behaviors, perhaps that have been escalating in seriousness and frequency over time or a very serious incident just recently occurred.

If this is the case, check the box in item #5 that *The RAC has been unable to identify any accommodations appropriate to support this applicant*. Complete the RAC participants section and then move on to item #6 of the HCNA.

**Step 8**  
 CENTER CLINICIAN MAKES  
 FINAL DECISION



In item #6 of either the HCNA or the DTA, the center licensed health professional completing the assessment selects the appropriate recommendation of denial. If the option is to refer to an alternate center for consideration, please see [Alternate Center Recommendation](#) below.

**Step 9**  
 CENTER CLINICIAN SIGNS  
 ASSESSMENT



The center licensed health professional completing the assessment prints his or her name, title, and includes types of licensure(s), signs and then dates the assessment.

**Step 10**  
 SUBMIT TO REGIONAL OFFICE  
 FOR REVIEW



The center prints out the applicant file in its entirety (i.e., eFolder (admissions documents), medical and disability documents, and submits the file to the respective Regional Office for review.

<b>Completing the Check Boxes</b> <b>Item #5 of the HCNA or DTA</b>	
Checking a “yes” response box	The applicant was offered the specific accommodation and “accepted” it.
Checking a “no” response box	The applicant was offered the specific accommodation and “rejected” it.
Leaving response box blank	The accommodation was not discussed or reviewed with the applicant because it was either not necessary, appropriate or both.

## Center Applicant File Review Process

### Recommendation of Denial with a Referral to an Alternate Center

#### Step 8 (cont. from above)

CENTER CLINICIAN MAKES  
FINAL DECISION



If the center licensed health professional believes that the applicant could be enrolled in Job Corps but at an alternate center where needed supports and services are available, then s/he should recommend denial with a referral to an alternate center.

*In my professional judgment, health care needs are manageable at Job Corps as defined by basic health care services in Exhibit 6-4 but require community support services which are not available near center. Documentation of efforts to arrange for less frequent treatment in home state and/or to secure community support near center can be found in Question #7 below. Applicant should be considered for center closer to home where health support and insurance coverage is available. File is forwarded to Regional Office for final determination.*

#### Step 9

ALTERNATE CENTER  
JUSTIFICATION



Complete item #7 of the HCNA: *If recommending a different center, document efforts to arrange less frequent treatment in home state and/or secure community support near center in the space below. (Include name of organizations/facilities and specific individuals contacted and why access is not available.)*

#### Step 10

CENTER CLINICIAN SIGNS  
ASSESSMENT



The center licensed health professional completing the assessment prints his or her name, title, and includes types of licensure(s), signs and then dates the assessment.

#### Step 11

SUBMIT TO REGIONAL OFFICE  
FOR REVIEW



The center prints out the applicant file in its entirety (i.e., eFolder (admissions documents), medical and disability documents, and submits the file to the respective Regional Office for review.