

Massachusetts

Inclusive Concurrent
Enrollment Initiative

Bristol Community College

SCHOOL DISTRICT
STUDENT APPLICATION

2025 - 2026

What is the MAICEI Program?

The Massachusetts Inclusive Concurrent Enrollment Initiative (MAICEI) at Bristol Community College provides a fully inclusive college experience to students with intellectual disabilities and/or autism who are 18–21 years old and who are (1) students enrolled in a public school system and receiving special education services under an Individualized Education Plan (IEP). Each student who participates in the MAICEI initiative is considered a fully enrolled Bristol Community College student and will be able to audit or take for credit up to three college courses per semester that are aligned with their career goals and interests. In 2025-2026, Bristol will be offering classes “in person” and “online”.

The key to the success of this initiative is ensuring that students receive the help they need. While it is important to take advantage of the supports and resources already available on campus (e.g. supports from the Office of Disability Services, tutoring sessions at the Learning Center) each student will have an education coach provided by the sending school district. The coach will support the student in classes and campus activities. The ultimate goal of the MAICEI initiative is to better prepare students for employment through taking appropriate academic courses, promotion of self-determination, self-advocacy, increased independence, and further development of social skills.

Program components for 2025-2026:

- Students will be admitted as Bristol Community College students.
- Students will be able to audit or take for credit up to 3 classes per semester (with no pre-requisites) that relate to their career goals and areas of interest.
- Students will have access to the same academic services available to all students (e.g. advising, tutoring).
- Students will participate in career development activities
- Students in their second year will gain work experience by participating in internships on and off campus (as available)
- Students will participate in the life of the college and have opportunities to join clubs and take part in campus social activities
- Students will participate in a person centered planning process

Who is eligible?

- Students who are enrolled in a Bristol Community College MAICEI partnering school district
- Students who are 18-21 and have a documented intellectual/developmental disability (e.g. Individualized Education Plan (IEP) and who are eligible for special education services from the school district
- Students who have identified post-secondary education as part of their vision statement
- Students who are eager to learn in a college setting
- Students who have a good high school attendance record
- Students who have had their application approved by the sending school district

Admission into the MAICEI initiative is based on one academic year. Students who wish to continue on will be able to reapply. The application process involves the following steps:

- Complete the application form making sure to include student/parent/guardian and school signatures
- Attach a copy of the current IEP with the Transition Plan and any relevant assessments
- Complete an interview with the MAICEI Coordinator and MAICEI Director

Once your application is received we will then contact you to set up an interview.

COMPLETED APPLICATIONS ARE DUE BY APRIL 18TH, 2025

For more information please contact

Paul Correia

Phone 508 965-8629 Email: Paul.Correia@bristolcc.edu

Ross Hooley

Phone 508 207-2906 Email: maicei@bristolcc.edu

APPLICATIONS CAN BE EMAILED TO:

maicei@bristolcc.edu

OR MAILED TO:

MA Inclusive Concurrent Enrollment Initiative

Bristol Community College

c/o Ross Hooley - E206

777 Elsbree St

Fall River, MA 02720

APPLICATION FOR ADMISSION TO BRISTOL COMMUNITY COLLEGE MAICEI

Last name: _____ First and middle names _____

Address: _____ City _____ Zip _____

Home phone: _____ Cell phone: _____

Email address: _____ Date of birth _____

SSN# _____ - _____ - _____ Gender identification: _____

High School: _____

Please list any medical or physical circumstances (i.e. allergies) that may impact your participation in classroom, social or recreational activities while on campus.

Do you think you may require any classroom accommodations at college (e.g. extended time for tests, testing in a quiet room with no distractions, note taker, preferential seating):

Are you your own guardian: Yes () No ()

Are you enrolled with the Massachusetts Rehabilitation Commission or Dept Developmental Services:

MRC _____ Dept of Developmental Services _____

Please provide information as to who to contact in an emergency (include parent/guardian):

1.Name: _____ Relationship: _____

Contact phone: _____ Email address: _____

2. Name: _____ Relationship: _____

Contact phone: _____ Email address: _____

School contact information:

School district: _____

Referring school contact person: _____

Title: _____ Contact phone: _____

Email address: _____

School address: _____

Why do you want to go to college? What goals are you hoping to achieve at college?

1.

2.

Have you thought about college courses you may want to take at Bristol? If so which ones?

What kind of job would you like after leaving school?

List your 3 favorite school subjects:

1.

2.

3.

What do like to do in your spare time (hobbies/interests/clubs)?

Work experience (volunteer/internship/paid):

Job title

Employer

Dates employed

1.

2.

3.

Please provide any additional information you would like to tell us:

In signing this form I am giving permission for the MAICEI coordinator to: (1) request additional information as needed from the school district to complete the referral process and (2) permission to provide documentation (IEP) of student's disability to Bristol Community College - Office of Disability Services for the purposes of planning and support. For school personnel, your signature will verify that this student is a suitable referral for MAICEI.

Student signature

Date

Parent/Guardian signature

Date

School Contact signature

Date

Director of Special Education/Student Services signature

Date

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