

FOR REFERENCE ONLY

Fill out the online form to apply. <https://bayareamanufacturingcareers.com/ua-academy.html>

Uniquely Abled Academy (UAA) Application

Dear potential student,

This is the APPLICATION for the Uniquely Abled Academy program. This is an intensive job training program for high-functioning autistic adults that will prepare you for an entry-level job as a CNC operator at manufacturing companies. CNC operators use Computer Numerically Controlled (CNC) machine tools such as mills and lathes to produce precision metal parts.

If you are not quite ready to apply, but want to be put on the mailing list, you can fill out the [interest survey here](#).

This program will consist of safety training, machining (manual & CNC), career preparation activities, math, and industry tours. It will be in-person at De Anza College in Cupertino, CA. There will be up to 10 students in the class.

UAA Program

- DATES: July 6 - Sept 26, 2026
- TIMES: Mon - Fri, 8 am - 4 pm (6.5 hours instruction, 1 hour lunch, 2x 15-min breaks)
(training program is about 360 hours total)
- LOCATION: De Anza College (Cupertino, CA). This is an IN-PERSON class
- WEBSITE: More information can be found [here](#).

Please fill out the application below. Qualified applicants will be contacted to schedule an interview.

NOTE: All information provided here is confidential and will only be used to help choose applicants and in the running of the program.

We look forward to speaking with you soon.

Mark Martin
Regional Director, Advanced Manufacturing
Bay Area Community Colleges
markmartin@peralta.edu
<https://bayareamanufacturingcareers.com/ua-academy.html>

Micaylah Stewart
Jay Nolan Community Services
JayNolan.org

* Indicates required question

1. Email *

DEMOGRAPHIC INFORMATION

2. First Name *

3. Preferred Name (if different)

4. Last Name *

5. Confirm Email


6. Phone number *

7. Mailing Address (street, city, zip code) *

8. What city do you live in?

I know, you supplied this in the mailing address but having it here makes it easier to sort! :-)

9. COUNTY *

 Dropdc

Mark only one oval.

- Alameda
- Contra Costa
- Marin
- Monterey
- Napa
- San Benito
- San Francisco
- San Mateo
- Santa Clara
- Santa Cruz
- Solano
- Sonoma

10. COMMUTE: How will you travel to the program on MOST days? *

Program is at De Anza College, 21250 Stevens Creek Blvd, Cupertino

Check all that apply.

- Drive myself
- Have someone drop me off
- Public transit (BART, bus, light rail, etc.)
- Walk / bike
- Ride share service (Uber / Lyft)
- Other: _____

11. HOUSING: Would you like to connect with other students to see if they might be interested in renting housing together during the 12-week program?

Note: The program does not pay for housing. This would be an additional expense on your part.

Mark only one oval.

- Yes
- No
- Maybe
- Other: _____

12. Gender

Mark only one oval.

- Female
- Male
- Non-binary
- Other:

13. How would you best describe your ethnicity?

Check all that apply.

- American Indian or Alaska Native
- Asian
- Black or African-American
- Hispanic, Latino or Spanish Origin
- Middle Eastern or North African
- Native Hawaiian or Other Pacific Islander
- White
- Prefer not to say
- Other: _____

14. BIRTHDATE *

You must be 18 by the end of the program in September 2025.

Example: January 7, 2019

15. Have you ever been convicted of a felony? *

This does not disqualify you from the program, but it can impact which companies you can apply to.

Mark only one oval.

Yes

No

Other:

16. If yes, please explain.

17. Emergency Contact - NAME *

18. Emergency Contact - RELATION *

Mom, Dad, Friend, ...

19. Emergency Contact - PHONE # *

20. Emergency Contact - EMAIL *

WORK BACKGROUND

21. Are you currently working (paid or volunteer)? *

Mark only one oval.

Yes

No *Skip to question 28*

CURRENT JOB INFORMATION

22. What type of work are you doing?

Retail, food hospitality, manufacturing, delivery, etc.

23. Job TYPE

Mark only one oval.

- Permanent
- Temporary to permanent
- Contractor
- Internship / Summer job
- Other:

24. Full-time or part-time?

Mark only one oval.

- Full-time (>35 hours/week)
- Part-time (21-35)
- Part-time (10-20)

25. HOW LONG have you worked there?

26. What's your HOURLY WAGE?

27. Do you receive BENEFITS (medical, vacation, sick leave, etc.)?

Check all that apply.

- Medical
- Dental
- Vision
- Vacation
- Other: _____

PREVIOUS EXPERIENCE

28. JOBS: What jobs have you previously had (paid or volunteer)?

- Please include how long you worked there, and whether or not you worked full or part-time.
- EXAMPLE: Applebee busboy (summer part-time). Fry's electronics repair person (2 years full-time), etc. If no previous work experience, put N/A (not applicable).

29. ACTIVITIES: Describe any programs or activities you have participated in since high school.

EDUCATION INFORMATION

30. What is your highest level of education? *

Mark only one oval.

- HS Diploma / GED
- Some community college
- Community college certificate or Associates degree
- Some 4-year college
- Bachelor's degree or higher
- Currently in high school (graduating by start of program)
- Did not finish high school
- Other:

31. HIGH SCHOOL: If high school grad, what high school did you receive your diploma from? Include year of graduation.

32. COLLEGES: What colleges did you attend? (include years attended)
EXAMPLE: Foothill College (2010-11), San Jose State University(2010 - 14)

33. If you have a college certificate or degree/s what is it in?

34. What math classes have you taken (in K-12 or college) and completed? *

Check all that apply.

Algebra

Trigonometry

Geometry

None of these

Other: _____

35. Are you currently taking classes? *

Mark only one oval.

Yes

No

Other:

36. If yes, what school / organization are you taking classes from?

37. What types of classes are you taking?

SUPPORT SERVICES

38. Do you currently receive Dept of Rehabilitation (DOR) Services?

Mark only one oval.

Yes

No

Other:

39. DOR: If yes, what is the name of your Case Coordinator?

40. DOR: Email of case coordinator

41. Are you a client of a REGIONAL CENTER (RC)?

Mark only one oval.

Yes

No

Other:

42. RC: If yes, which RC, and what is the name of your Service Coordinator?

43. RC: Email of service coordinator

44. Is it OK to contact your DOR or RC coordinators to discuss your application?

Mark only one oval.

Yes

No

Other:

45. Please list any other services (life skills coaching, etc.) you receive.

46. Are you conserved?

Mark only one oval.

Yes

No

47. If conserved, please list conservator name, email, and phone #.

APPLICATION INFORMATION

48. MACHINING: What do you know about CNC and manual machining? Have you watched any videos online, or seen it in person?

49. ESSAY: Please write 1 - 2 paragraphs about yourself. *

Tell us something about yourself that will help us to get to know you better. It can be about a special interest, a special person in your life, or an activity that you like to do (or anything else that you would like to share with us).

50. Please list your strengths, talents, interests and hobbies *

51. What made you apply to this program? *

52. What do you hope to do after completing the program? *

53. Please provide any additional information that you feel will be helpful when we evaluate your potential as a trainee.

54. This program, and CNC operator jobs in general, require standing for long periods of time (up to 2 hours between breaks). Is this something that is acceptable to you?

Mark only one oval.

Yes

No

Maybe

55. ATTENDANCE: Will you be able to attend every day? *

The program will run 5 days a week, 8 am - 5 pm each day for 12 weeks (Jul 6 - Sep 25, no class on Labor Day). It will be held IN-PERSON on the De Anza College campus in Cupertino. The expectation is that you be able to attend every day (except in case of an emergency).

Mark only one oval.

Yes

No

Maybe

Other:

56. REFERENCE NAME: Please list the name of someone who knows you well (other than a relative) that can tell us about you and/or your work ethic.

57. REFERENCE Relationship *

58. REFERENCE Email *

FUNDING

- Total cost for this program is \$17,000. Students will need to bring their own funding for the program through DOR, Regional Center, other sources, or through self-funding.

- If you do not currently have funding, we will work with you to look for funding, but can not guarantee we will be able to find it.

59. Do you have funding to pay for this program? *

Mark only one oval.

- Yes
- Maybe
- No, I need help finding funding.

60. If yes, what sources will your funding come from? *

Check all that apply.

- DOR
- Regional Centers
- Self-Determination Program
- Self-funding
- Other: _____

61. Comments on Funding

OTHER INFORMATION

62. How did you find out about this program?

63. Comments

64. **I CERTIFY THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. (please type full name below)**

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