

On Your Marq Parent Application

Start of Block: Default Question Block

Q22

Parent /Caregiver: Please answer the questions below regarding the On Your Marq applicant. Please answer honestly, providing details/explanations. These questions are intended to give us a better picture of the young adult and to determine if On Your Marq is a good fit. We know that you have likely been completing many forms as you go through this process, but we appreciate if you share as many relevant details as possible. If you have any questions or need clarification, please email the On Your Marq team at oym@marquette.edu.

Q1 Applicant Information

Applicant Name (1) _____

Applicant Date of Birth (2)

Your Name (3) _____

Relationship to Applicant (4)

Your Email (5) _____

End of Block: Default Question Block

Start of Block: Block 1

Q8 Please describe any classroom supports that the applicant received in high school. In your opinion, what was helpful and what was not? Why?

Q9 Based on your observations, please describe how the applicant studied or completed homework. What seemed to work best and what did not seem to work?

Q34 What kinds of academic supports do you think the applicant may need in college?

Q35

Please describe the applicant's current friendships and social activities based on your observations. For example, whom does your young adult like to hang out with and how often? What do they like to do together?

Q36 What type of supports do you think the applicant may need with social issues, such as friendships/relationships, communication, and interaction with other students and faculty/staff?

Q37 What kinds of supports do you think the applicant may need to manage daily living tasks such as personal hygiene, eating well, doing laundry, managing money?

End of Block: Block 1

Start of Block: Block 2

Q38 For each of the following areas, please indicate if you feel that the applicant would request help, if it was needed. If you feel that it would be uncomfortable or difficult for them to reach out for help in any particular area, please indicate that.

Help with Academics (1) _____

Help with Social Issues (2)

Help with Daily Living Skills (3)

Help with Emotional Needs/Stress Management (4)

Any Other Areas (5) _____

Q44 What do you see as the applicant's strengths?

Q45 What are some areas of current difficulty for the applicant?

Q46 If you have any particular areas of concern about this applicant attending college / Marquette, please describe them here.

Q47 What do you hope the applicant gets out of participating in OYM?

Q48 Why do you think Marquette will be a good fit for the applicant?

End of Block: Block 2

Start of Block: Block 3

Q15 Documentation

Q16 If you have your students disability documentation available, please upload it here. If you don't have it right now, you can email it to oym@marquette.edu

End of Block: Block 3
