

PIP Application Instructions

- ✓ Before starting, please read all instructions, questions, eligibility details, and submission requirements on this form. If you have any questions or need accommodations, contact the Virginia Board for People with Disabilities at training@vbpd.virginia.gov.

- ✓ **Applicants must complete all sections of the application form and submit it to the VBPD by the deadline.** To be considered for the 2025-2026 PIP class, applications must be received no later than **5:00 p.m. on Friday, March 14, 2025.**

- ✓ Submission through our [online form](#) is preferred. Applications will also be accepted by email, fax, or mail. Information on how to complete and submit the application is included in the instructions on the last page.

APPLICATIONS SHOULD BE RECEIVED NO LATER
THAN **FRIDAY, MARCH 14, 2025 BY 5:00 P.M.**
TO BE CONSIDERED FOR THE PIP 2025-2026 CLASS.



Year _____ Class _____

Application Information

Name of Applicant _____

Street Address _____

City _____ County _____

State _____ Zip Code _____

Email _____ Alternate Email _____

Phone _____ Alternate Phone _____

Date of Birth _____ Ethnicity _____

Gender Male Female Non-binary I prefer to describe myself: _____ I don't want to answer _____

References

Please provide three references and ask each to complete the online [Recommendation Form](#). The form can also be downloaded and emailed to: training@vbpd.virginia.gov.

Name _____ Phone _____ Email _____

Name _____ Phone _____ Email _____

Name _____ Phone _____ Email _____

Definition of Developmental Disability

- (A) In general, developmental disability means a severe, chronic disability of an individual that:
- (i) is attributable to a mental or physical impairment/combination of mental and physical impairments;
 - (ii) is manifested before the individual attains the age 22;
 - (iii) is likely to continue indefinitely;
 - (iv) results in substantial functional limitations in three or more areas of major life activity, such as self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency; and
 - (v) reflects the individual's needs for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are lifelong or for an extended duration and are individually planned and coordinated.
- (B) An infant or young child (an individual from birth to age nine) who has substantial developmental delay, a specific congenital, and/or an acquired condition may be considered to have a developmental disability without meeting three or more of the criteria described in the clauses (i) through (v) in subparagraph (A) if the individual, without services and supports, has a high probability of meeting those criteria later in life.



Eligibility

The VBPD uses the above definition of developmental disabilities to determine eligibility for participation in PIP.

Are you a person with a developmental disability? Yes No

If so, please briefly describe your disability and how it affects your activities of daily life below.

Are you a parent of a child with a developmental disability? Yes No

If not, please specify the relationship you have with him or her below.

What is the age of your child?

Briefly describe your child's disability/disabilities and how his or her activities of daily living are affected.

Questions

Please be *concise* with your responses. You may seek assistance to complete your application. If you need to submit your responses in another format, the VBPD staff is happy to work with you.

Please tell us a little about yourself and family.



Please tell us about your views on community inclusion and integration.

What does the word advocacy mean to you? When have you demonstrated advocacy skills?

When have you been creative in getting services for yourself or someone else? How?

Advocacy can be an ongoing process. Tell us about an experience that shows your determination.

What would you like to see change in the current service delivery system? Please be specific and give details.



Tell us about your strengths and any unique experiences you have had.

List activities in which you regularly participate (employment, volunteer work, community service, board assignments, etc.).

Tell us about something you have done that shows you can complete a long-term project and share information with others.

What do you hope to gain from Partners in Policymaking?

How did you hear about PIP?

PIP participants are people with developmental disabilities and/or parents of young children with developmental disabilities. Individuals participating in the program will attend advocacy training and skill-building workshops. Program participants will attend and participate in seven two-day sessions between September and April. Completion of this application and selection for the PIP program requires substantial commitment of time, motivation, and energy.

If accepted into the PIP program, I agree to:

- ✓ Attend and participate in ALL seven two-day sessions (sessions begin Friday at 1:00 p.m. and conclude Saturday at 3:00 p.m.).
- ✓ Complete all homework and class assignments.
- ✓ Complete one major project designed to meet competencies.

DISCLAIMER:

The 2025-2026 PIP Training Program will follow a hybrid format.

- **In-person sessions:** 3 sessions will take place in person: September 12 & 13, 2025; March 6 & 7, 2026; and April 10 & 11, 2026, at a hotel location to be announced in early 2025.
- **Virtual sessions:** 4 sessions will be held via Zoom: October 3 & 4, 2025; November 14 & 15, 2025; January 2 & 3, 2026; and February 6 & 7, 2026.

PIP sessions are scheduled on Fridays (starting at 1:00 p.m.) and Saturdays (8:30 a.m. – 3:00 p.m.). Applicants should plan for both in-person and virtual meetings and remain flexible as needed. The Virginia Board for People with Disabilities will notify applicants of any schedule changes.

I give permission for PIP staff to share my application with members of the selection committee.

By entering my name below, I certify that I am the applicant represented by the information on this application, as well as guarantee that all of the information provided is accurate to the best of my knowledge and has been voluntarily disclosed. For the purpose of the PIP application submission, the insertion of your name on the signature line qualifies as an electronic signature.

Signature _____

Date _____

Application Checklist and Submission Instructions

Did You Remember To Do These Things?

- ✓ Complete ALL sections of this application. Applications with incomplete sections will NOT be considered.
- ✓ Ask your three references to complete Recommendation Forms (Forms must be received by the application deadline).
- ✓ Include any additional pages.

To Complete and Submit Application by Email

- Download the [application form](#).
- Answer each of the questions on the application form by filling in the blanks provided and/or checking the appropriate circles. If you need to stop and start again later, remember to save the file before closing it so that you do not lose the answers to the questions that you have already completed.
- When you have finished completing the application form, save it. Prior to returning the application by email, be sure to include your electronic signature with your assurance that you are the applicant and that you have voluntarily supplied the requested information. For the purpose of the application submission, the insertion of your name on the signature line qualifies as an electronic signature.
- Attach the saved file containing the completed form to a new email message and send it to: training@vbpd.virginia.gov.

To Complete and Submit by Fax

- **Option A:** Download the application form as indicated above for email submission. Save and complete that form **on your computer**. Print the completed form.
- **Option B:** Download the application form and complete the printed copy **by hand**. You may attach pages with numbered responses, if necessary.
- Sign the application form signature page.
- Fax all pages of the completed form to 804-786-1118.

To Complete and Submit by Mail

- **Complete application form using either Option A or B above.**
- **Sign the application form signature page.**
- Mail or deliver all pages of the completed application, including the signed copy of the signature page, to the address listed below.

Mail applications to:

Partners in Policymaking
Virginia Board for People with Disabilities
Ratcliffe Building
1602 Rolling Hills Drive, Suite 100
Richmond, VA 23229



Accommodations

If you need an accommodation to complete this form, email training@vbpd.virginia.gov or call 804-786-0016 to speak to a Training Program Coordinator. Unless accommodations are requested, only online, emailed, faxed, and mailed applications will be accepted. We strongly encourage [submission via our online form](#).

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2025-2026 CLASS
EMAIL
training@vbpd.virginia.gov**

We invite you to duplicate and share this application!

Virginia Board for People with Disabilities
Ratcliffe Building
1602 Rolling Hills Drive, Suite 100
Richmond, VA 23229
800-846-4464 (TTY Voice)
www.VBPD.virginia.gov

