



VANCE COUNTY EARLY COLLEGE HIGH SCHOOL
APPLICATION FOR FRESHMAN CLASS
2019-20

Application Information/Instructions: READ CAREFULLY

All current eighth grade students who reside in the Vance County School District zone are eligible to apply.

- **Admission is not automatic.** All completed applications will be reviewed for consideration for school admission. Applicants receiving **100 points** or greater will be considered for admission.
- Approximately sixty 2019-20 applicants will enter Vance County Early College High School’s freshman cohort. If more than 60 students meet the 100 point criteria, those students meeting the 100 point criteria will enter a lottery process.
- Applications will be reviewed for admission based on the following four criteria:
 1. writing sample (70 points = grammar, clarity of thought & written statement)
 2. legible copy of **most recent school report card (2018-19 Semester 1 Grades):**

Each A	3 points
Each B	2 points
Each C	1 point

3. two teacher recommendation forms (1 points per above average, 0.5 point per average per form)
- Notifications for acceptance, wait list, or denial will be mailed to students by May 1, 2019.
 - Accepted applicants and their parent(s)/legal guardian are required to attend a MANDATORY acceptance meeting in May. (The specific date will be included in acceptance letter.)
 - All students included in the lottery process, but who do not receive an initial acceptance offer, will be waitlisted. If space becomes available through the first 10 school days of the new school year, the next student listed will be offered immediate acceptance into the program.

PLEASE NOTE: Vance County Early College High School is a rigorous educational institution focused on having students obtain an Associate Degree. Acceptance is a highly sought-after honor and requires commitment to the ideals of the school. **Your acceptance to Vance County Early College High School will indicate your willingness and commitment to obtaining an Associate Degree, or a minimum of one year of college transferable credits. Failure to meet the academic and behavioral requirements of the school will result in dismissal from VCECHS.**

ALL COMPLETED APPLICATIONS, COPY OF MOST RECENT REPORT CARD, & TWO TEACHER RECOMMENDATION FORMS MUST BE SUBMITTED AS **ONE** COMPLETE PACKET TO YOUR:

MIDDLE SCHOOL COUNSELOR ON OR BEFORE
 3:00 PM, THURSDAY, FEBRUARY 28, 2019

OR

MS. HENRY, IN VCECHS OFFICE, ON OR BEFORE
 3:00 PM, FRIDAY, FEBRUARY 28, 2019

LATE OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. NO EXCEPTIONS.

In Compliance with federal law, including the provisions of Title IX of the Education Amendment of 1972, Vance County Schools administers all state operated educational programs, employment activities, and admission without discrimination because of race, religion, national or ethnic origin, color, age, military service, disability or gender, except where exemption is appropriate and allowed by law.

Inquiries or complaints should be directed to: Student Services and Federal Programs, Vance County Schools, P.O. 7001, Henderson, NC 27536.
 Telephone: 252.492.2127 Fax: 252.492.3776

Application Checklist

My application packet includes all of the following information:

- _____ 1. Parent completed & signed Student Information page
- _____ 2. Student writing sample & essay page completed & signed
- _____ 4. Copy of my 2018-19 First Semester Report Card
- _____ 3. Two **sealed** teacher recommendation forms

Keep this page for your records.

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Parent or legal guardian must complete this portion of the application in blue or black ink.

Student Information:

Student: _____
(Last) (First) (Middle Initial)

Age: _____ Date of Birth ____/____/____

Current School: _____

Name(s) of parent/legal guardian: _____

Home address: _____

Parent email: _____ Home phone #: _____

Cell phone #: _____ Work phone #: _____

Please check (√) students' ethnicity/race:

- | | |
|---|---|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> African American | <input type="checkbox"/> Multi-Race |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White (Non Hispanic) |
| <input type="checkbox"/> Hawaiian/Pacific Islander | |

Applicant has an Individualized Educational Plan (IEP) : Yes _____ No _____

Applicant has a 504 Plan: Yes _____ No _____

Please circle the educational level of student's parent/guardian.

Parent 1	Parent 2
• Some high school	• Some high school
• Associate Degree	• Associate Degree
• High School diploma/GED	• High School diploma/GED
• Bachelor's Degree	• Bachelor's Degree
• Some College	• Some College
• Master's Degree	• Master's Degree
• Professional Certification/ License	• Professional Certification/ License
• Doctorate Degree	• Doctorate Degree

 (Parent Signature)

 (Date)

VECHS OFFICE ONLY: Received date/time _____ **Authorized staff signature:** _____

District Office Use Only

Current EC Status: _____

(Student Signature)

(Date)

**Vance County Early College High School
Teacher Recommendation Form**

Directions for Applicant:

Identify two of your 8th grade teachers who can attest to your academic abilities and disposition over the past year. Provide each teacher (at least one who taught a core subject) with a recommendation form. Teachers will enclose the completed recommendation form in a sealed envelope (with his/her signature signed and taped over seal) and return to applicant. Include sealed recommendations with your completed application along with a copy of your most recent report card.

Incomplete and/or late applications will NOT be processed for consideration. (NO EXCEPTIONS)

Student Name: _____
(First) (Middle) (Last)

Current school: _____

For parents and applicant: I hereby waive my right to access this recommendation and authorize the recommender to provide an evaluation and all relevant information to VCECHS for purposes of my child's application for consideration of acceptance.

(Parent Signature) (Date)

(Student Signature) (Date)

For Recommender/Teacher:

Purpose: We appreciate your cooperation in completing this form. Please be upfront about this student's display of academic ability, motivation, and disposition. We understand the difficulty in evaluating a student and are fully aware that children are constantly growing, changing, and developing. This form is only one piece of the student's profile to be used in our assessment process. This form will not become a part of the student's permanent record. **Return this form in a sealed/signed envelope to the applicant (to be submitted with application by applicant.** Note: Completed application packets are due to VCS school counselors on or before 3:00 pm, February 28, 2019. Thank you for your thoughtful attention to this request.

Recommender's Name: _____
(First) (Last)

Relationship to student: _____ I have known this student for ____ (yrs.) / ____ (mos.)
(Subject taught)

Recommender: The applicant and applicant's parent or legal guardian has signed the above waiver. Your recommendation will be kept confidential to the extent permitted by law. Thank you for your thoughtful attention to this request.

Signature: _____ Date: _____

Phone number where we may reach you: (____) _____ email: _____

STUDENT OBSERVATION ASSESSMENT

Check (√) the category you have most frequently observed student display.

CHARACTER & PERSONALITY TRAITS	Above Average (1 point each)	Average (0.5 point each)	Below Average	Needs Improvement	Comments
Conduct					
Leadership					
Maturity					
Social relationship with peers					
Self-confidence					
Integrity					
Sense of responsibility					
Interaction with teachers/adults					
Creativity					
Respect for others					
ACADEMIC TRAITS	Above Average (1 point each)	Average (0.5 point each)	Below Average	Needs Improvement	Comments
Effort/Initiative					
Study habits or organization of work					
Ability to ask questions for clarity					
Commitment to homework					
Ability to follow directions					
Ability to work independently					
Ability to work in a group					
Ability to express ideas orally					
Ability to express ideas in writing					
Level of classroom engagement/participation					

Please indicate your overall level of recommendation to VCECHS based on your above assessment input:

____ Strongly recommend (3pts.) ____ Recommend (1pt.) ____ Do not recommend

We appreciate all additional comments & observations you would like to add concerning this student's abilities, personal qualities, special interests, etc. you believe would contribute to his/her application, and welcome your additional written/typed and signed statement to be included in a sealed envelope, with this form.

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