How to Apply

There are several steps required to apply to the Genesee County CTE Early Middle College.

**Step 1:** Apply online to Mott Community College [https://appsprod.mcc.edu/onlineapp/](https://appsprod.mcc.edu/onlineapp/).
- The student must have his/her Social Security Number to apply.
- Once the application has been submitted, the student will receive a communication from Mott CC with a Mott ID number attached.
- Students should keep their Mott ID number in a safe place.

**Step 2:** Complete the Accuplacer assessment. You must apply to Mott at least 7 days prior to taking the Accuplacer assessment.

*Option 1: Take the Accuplacer at a Mott Community College campus.*
- You can schedule a date and time to take the Accuplacer at Mott online [https://www.mcc.edu/placement-testing/index.shtml](https://www.mcc.edu/placement-testing/index.shtml).
- Make sure to bring photo ID and Mott ID number on test day.

*Option 2: Take the Accuplacer at the Genesee Career Institute.*
- Bring photo ID and Mott Community College ID number.
- The assessment will be administered on Thursday, February 13, 2020 from 8:50 am to 10:35 am, Thursday, February 20, 2020 from 8:50 am to 10:35 am at the Genesee Career Institute, and Thursday, February 20, 2020 from 12:05 pm to 1:50 pm. Students may utilize the transportation provided from their local high school to GCI for these testing days.

*Option 3: Local High School*
- Your high school may host Accuplacer testing. See your high school counselor for more information.

**Step 3:** Complete the Genesee County CTE Early Middle College student application packet.

**Step 4:** Make a copy of the completed application packet for your records.

**Step 5:** Submit the completed application packet and return the folder to your high school counseling office by the due date – March 2, 2020.
2020-2021 STUDENT APPLICATION
Application Deadline: Monday, March 2, 2020

Student Name: ___________________________  ____Male  ____Female

Date of Birth: ___________________________ (mm/dd/yyyy)

Street Address: ___________________________  City/Zip: ___________________________

Home phone with area code: __________________ Student cell phone: __________________

Student E-mail: ___________________________

Name, phone number and email address of parents/guardians with whom the student resides:

Name: ___________________________ Phone Number: ______________

Email: ___________________________

Name: ___________________________ Phone Number: ______________

Email: ___________________________

Current high school: ___________________________ Current grade: ______________

School district in which student resides: ___________________________

**GC CTE EMC Program of Study** (see page 2 & 3 in application folder for options):

________________________________________________________________________

Preferred Student/Family Interview Timeframes (Check all that apply):

1:00 PM – 3:00 PM  3:00 PM – 5:00 PM  4:00 PM – 6:00 PM  7:00-8:00 PM

Please indicate here if there are any special medical conditions or food allergies for the EMC staff to be aware of during the mandatory boot camp week.

________________________________________________________________________

________________________________________________________________________
Student Application Essay

As part of the application process, students must write and submit a one-page typed essay. The Genesee County CTE Early Middle College requires honesty and originality in a student’s academic work. You are expected to submit an essay that is your own original work. Essays are required to have one-inch margins, be double-spaced and use 12 pt. font.

Topic
Why do you want to be accepted into the Genesee County CTE Early Middle College?

Thinking about the Topic
• Why do you feel the Genesee County Career and Technical Education Early Middle College program would be a good fit for you?
• What do you like about the early middle college concept?
• What do you hope to accomplish by attending the GC CTE Early Middle College?
• What challenges do you think you’ll face as a participant in the program?
• How are you prepared for college-level coursework and expectations?

Writing about the Topic
You might, for example, do one of the following:
• Describe the special talents you have that will help you succeed in the program.
• Discuss the reasons you are interested in the GC CTE Early Middle College.
• Discuss the program of study you wish to pursue.
• Describe how you learned about the GC CTE Early Middle College and why it appeals to you.

Essays will be evaluated on the following criteria:
• The overall quality of writing (organization, punctuation, language, style, grammar, spelling)
• Ability to answer questions clearly and concisely within the one-page requirement
• Your passion for your career goals and your commitment to successfully completing the Genesee County Career and Technical Education Early Middle College program

Checklist for Polishing:
• Have I checked and corrected my spelling, punctuation, and capitalization?
• Have I typed my essay and followed the length requirement of one page?
Student/Parent/Guardian Contract

Student Name: ________________________________________________________

I, the student, as the participant in the Genesee County Career and Technical Education Early Middle College program, signify that I understand and agree to the terms and conditions listed below by initialing each statement and signing my full name at the end of this contract.

I/we, the parent(s)/guardian(s), signify that I/we understand and agree to the terms and conditions listed below by initialing each statement and signing my/our full name(s) at the end of this contract.

<table>
<thead>
<tr>
<th></th>
<th>Parent / Guardian Initials</th>
<th>Student Initials</th>
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</thead>
<tbody>
<tr>
<td>1. I/we understand that the Genesee County Career and Technical Education Early Middle College program is an early college program for eligible high school students.</td>
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<tr>
<td>2. I/we understand that enrollment in the GC CTE EMC program involves being enrolled in high school for a total of five years (grade 9 – grade 13). I/we understand that GC CTE EMC students can complete their high school diploma and may earn up to an associate degree or college certificate. I/we understand that CTE EMC students will not earn or receive their high school diploma until the completion of their 13th year.</td>
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<tr>
<td>3. I/we understand that GC CTE EMC students will take an approved math or math-related course for high school and college credit in the final year of the program (13th Year).</td>
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</table>
4. I/we understand that GC CTE EMC students will be required to attend and actively participate in a Summer College Success Boot Camp in the summer between grades 10 and 11. Monday, July 13 through July 16, 2020.

5. I/we understand that GC CTE EMC students must attend and pass all required high school classes and all program-approved college courses during their high school career and up through their 13th year. Students must complete all courses with a grade of C or higher. In order to successfully complete the program and obtain a college credential, we understand that the student must meet college level math requirements and complete a college level math course by the end of their 13th year.

6. I/we understand that this program is a shared family / school district responsibility. The school district will pay the cost of college tuition, fees, and required course materials for approved GC CTE EMC courses up to its state defined dual enrollment obligation. I/we understand that if I do not successfully complete a course, the district may ask me to reimburse them for all fees associated with that course; this payment is due prior to the start of the next semester of courses.

7. I/we understand that all textbooks, equipment, supplies, etc. that have been purchased or rented by the school district for use in GC CTE EMC courses shall at all times remain the property of that school district. I/we agree to care for these materials and return them at the conclusion of each semester.

8. I/we understand that I will be financially responsible for the loss or damage of any textbooks or supplies provided to me by the school district. I/we agree to reimburse the school district for costs associated with lost or damaged textbooks, equipment, and/or supplies prior to the next semester. I/we also understand that further participation in the GC CTE EMC program will not be allowed until all past costs are paid.
9. I/we understand that GC CTE EMC students, in conjunction with the Genesee County GC CTE EMC Coordinator are responsible each semester to enroll and register in the pre-approved EMC program courses, in accordance with the program’s registration procedures.

10. I/we understand that many of the courses will be offered on a college campus which may include college content not typically taught or considered appropriate in high schools, and those classes will include college students not part of the GC CTE EMC program.

11. I/we understand that GC CTE EMC students will still be considered enrollees of their high school district and that they are subject to laws, policies, and graduation requirements of said school district until the completion of the program (after their 13th year).

12. I/we understand that GC CTE EMC students are subject to student academic and disciplinary standards and policies of both the resident school district, the host school district (if applicable), as well as those of Mott Community College.

13. I/we understand that the transportation to/from the college and other required program events will be the responsibility of students and their parent/guardian.

14. I/we understand that as the parent/legal guardian of this student, I am giving permission for my son/daughter to be photographed and/or filmed for educational and/or marketing purposes while participating in the GC CTE EMC program.

15. I/we agree to sign the Mott Community College Release of Information form included with the application packet, and understand that Mott Community College will release academic, and financial records to the home school district and Genesee ISD.
16. I/we understand that my student will be advised each semester for college class selection by the high school counselor and the Genesee County Career and Technical Education Early Middle College Coordinator. I/we understand that a class registration list will be sent home for my review and that I/we may contact the Genesee County Career and Technical Education Early Middle College Coordinator with any questions or concerns and/or request a change.

17. I/we understand that a student or parent/guardian’s failure to comply with the GC CTE EMC contract could result in dismissal from the program.

18. I/we understand GC CTE EMC students will complete either 100 hours of community service or 40 hours of career exploration, internship, job shadowing or clinical experience, or 70 hours of combined community service and career exploration.

Student Signature: _______________________________

Student Printed Name: _______________________________ Date: _________________

Parent/Guardian Signature: __________________________

Parent/Guardian Printed Name: __________________________ Date: _________________
Student Information Release Authorization

I (student name), ___________________________________________________ authorize Mott Community College to release information contained in my student record to the individuals or organizations listed below.

- Genesee County CTE Early Middle College Staff, 2413 West Maple Ave., Flint, MI 48507
- High School (name): _____________________________________________________________

Type of information to be disclosed:
Information shared may include but is not limited to: college records, schedules, grades, attendance, faculty communications, transcripts, billing, academic plans, IEPs, 504s or any other pertinent information relevant to the progression through the Genesee County Career and Technical Education Early Middle College Program.

Purpose of disclosure:
Information release authorization allows Genesee County Career and Technical Education Early Middle College staff as well as high school staff the ability to work with the college on behalf of the student to provide appropriate services, program evaluation, and grade reporting requirements for program completion.

Student signature: _______________________________________ Date: __________________

Parent signature: ________________________________________ Date: __________________

Parent signature: ____________________ Date: __________________

Unless otherwise requested, this authorization will be terminated upon your withdrawal or completion of the Career and Technical Education Early Middle College program.
Academic Progress Information Sheet
To be completed by the high school counselor

Student Name: ___________________________ Date completed: ________________

Counselor Name: ___________________________ High School: _________________

Is this student on track to graduate on time? If no, please explain the area(s) where the student is behind:

____________________________________________________________________________

Student’s cumulative high school GPA: ________

Number of full day absences: 9th grade: __________ 10th grade: __________

Briefly share any information you believe is relevant to the student’s application to the GC CTE EMC program:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Please describe any current impediments that may hinder this student’s success in the GC CTE EMC program:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Based on my experience with the student, my overall recommendation for the student is:

☐ Highest recommendation
☐ Recommend
☐ Recommend, with reservation, please explain on back of this form
☐ Do not recommend

Counselor Signature: _______________________________________________________________________

*Please complete this form, attach a transcript and place it in the application folder. Completed folders should be submitted to the GC CTE Early Middle College Coordinator.*
Genesee County Career and Technical Education Early Middle College
Student Recommendation Form

High School Teacher 1

Student Name: ______________________ High School: ________________________________

To be completed by HS teacher:
Thank you for taking the time to fill out a recommendation form. The GC CTE EMC program allows students to complete both a high school diploma and an associate degree or certificate during high school, by postponing graduation by one year.

Your Name: ________________________ Relationship to student: ______________________

Phone: ____________________ Email: ____________________________________________

How long have you known the student? In what capacity do you know the student?
_____________________________________________________________________________

<table>
<thead>
<tr>
<th>Please rate the student on the following attributes</th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Exceptional</th>
<th>No basis for evaluation</th>
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<tbody>
<tr>
<td>Academic capability to succeed in college courses</td>
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<td>Takes responsibility for own success/actions</td>
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<td>Punctuality</td>
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<td>Ability to work with others</td>
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<td>Perseverance</td>
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Briefly share any other information you believe is relevant to the student’s application:
_____________________________________________________________________________
_____________________________________________________________________________

Based on my experience with the student, my overall recommendation for the student is:

☐ Highest recommendation
☐ Recommend
☐ Recommend, with reservation, please explain on back of this form.
☐ Do not recommend

Recommender’s Signature: ______________________________________

*Please complete this form and place it in a sealed envelope, then return it to the student to be submitted with his/her completed packet.*
Genesee County Career and Technical Education Early Middle College
Student Recommendation Form
High School Teacher 2

Student Name: ______________________ High School: ________________________________

To be completed by HS teacher:
Thank you for taking the time to fill out a recommendation form. The GC CTE EMC program allows students to complete both a high school diploma and an associate degree or certificate during high school, by postponing graduation by one year.

Your Name: ______________________ Relationship to student: ______________________

Phone: _____________________ Email: _____________________________________________

How long have you known the student? In what capacity do you know the student?
______________________________________________________________________________

Please rate the student on the following attributes

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Briefly share any other information you think is relevant to the student’s application:
______________________________________________________________________________
______________________________________________________________________________

Based on my experience with the student, my overall recommendation for the student is:

☐ Highest recommendation
☐ Recommend
☐ Recommend, with reservation, please explain on back of this form.
☐ Do not recommend

Recommender’s Signature: __________________________________________

Please complete this form and place it in a sealed envelope, then return it to the student to be submitted with his/her completed packet.
Genesee County Career and Technical Education Early Middle College
Student Recommendation Form

Non-Teacher

Student Name: ______________________ High School: ________________________________

To be completed by someone like a pastor, volunteer supervisor, employer, or coach (no parent/guardian please): Thank you for taking the time to fill out a recommendation form. The GC CTE EMC program allows students to complete both a high school diploma and an associate degree or certificate during high school, by postponing graduation by one year.

Your Name: ______________________ Relationship to student: __________________________

Phone: _____________________ Email: _____________________________________________

How long have you known the student? In what capacity do you know the student?

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<tr>
<td>Demonstrated ability to lead and follow</td>
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<td>Level of personal commitment, perseverance, and effort</td>
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<tr>
<td>Self-discipline and initiative, willingness to take responsibility for own actions/success</td>
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</table>

Briefly share any other information you believe is relevant to the student’s application:

_____________________________________________________________________________________________

Based on my experience with the student, my overall recommendation for the student is:

□ Highest recommendation
□ Recommend
□ Recommend, with reservation, please explain on back of this form
□ Do not recommend

Recommender’s Signature: ________________________________________________________________

Please complete this form and place it in a sealed envelope, then return it to the student to be submitted with his/her completed packet.
Student:

The Genesee County CTE Early Middle College offers a rigorous academic curriculum. Participation will require me to demonstrate a high level of commitment, maturity and responsibility. I understand that participation in this program requires my full academic, social and emotional commitment if I want to achieve my full potential. I declare that the information provided in this application packet is true and the essay represents my own work.

Student signature: _____________________________ Date: ________________

Student name (please print): _______________________________________________________

Parent/Legal Guardian:

I understand that my participation in my child’s education will help determine his or her likelihood of success in this program. I agree to be accessible and readily available to discuss my child’s progress and development. I recognize that acceptance into the GC CTE Early Middle College requires a commitment through grade 13. I also understand that acceptance into this program is a privilege and that my child must maintain the school standards in order to remain enrolled.

Parent/Guardian signature: _____________________________ Date: ________________

Parent/Guardian name (please print): _______________________________________________

High School Principal:

I recommend and fully support this student for the Genesee County Career and Technical Education Early Middle College.

High school principal signature: _____________________________ Date: ________________

High school principal name (please print): ___________________________________________