

*Madison Early College High School
800 Bailey Street
Mars Hill, NC 28754
Phone: 828.689.9552*

*Jennifer L. Caldwell, Principal
jcaldwell@madisonk12.net
mechs.madisonk12.net
Fax: 828.689.9644*

Madison Early College High School
Application for Admission
2017-2018

Madison Early College High School is a collaborative effort between Madison County Schools and AB-Tech Community College. The school is structured to provide relevance, rigor, and relationships for students wanting to pursue a high-school diploma and take college course work in a dual enrollment program. Students may be first generation college students, have financial need, be traditionally underserved in higher education, or benefit from an accelerated academic program.

Madison Early College students must possess the maturity and independence to accept the challenges of this progressive school. The Madison Early College student will belong to an intimate community of peers and faculty within a smaller setting than traditional high-schools.

- **Students:** *Thank you for your interest in Madison Early College. We are excited to begin our search for motivated students. Attached you will find many questions which will assist us in learning more about you and determining if you meet requirements for our program.*

- **Parents:** *Thank you for your encouragement, time, and support. This application contains several sections that must be completed by you. Please review the sections your child completes. Should you have any questions, please do not hesitate to contact the Early College. Completed applications can be turned into Madison Middle School or brought to the Early College campus.*

Applications Due By: April 01, 2017

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Part A: Parent Section Part I (To be completed by parent)
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Student Name _____ Student # _____ Gender _____ Race _____

Age _____ Date of Birth _____ Birthplace _____ SS # _____

Name(s) of Parent/Legal Guardian _____

Physical address _____

Mailing address _____

Student lives with: _____ both parents _____ Mother _____ Father _____ Grandparents _____ other

Parent e-mail address _____

Student e-mail address _____

Residence phone _____ Business phone (mother) _____ (father) _____

Cell Phone Mother _____ **Cell Phone father** _____ **Cell Phone Student** _____

School presently attending _____ Current Grade Level _____

Does your child ride the school bus? YES/NO (Please indicate morning, afternoon or both)

Parents Educational Background:

Please place a check under the highest level completed.

	Did Not Complete High School	High School Graduate	1-Year College	2-Year College	3-Year College	Earned 4-Year Degree College	Advanced Degree
Mother							
Father							

Please evaluate your child on the following characteristics. Check all that applies.

	Often	Occasionally	Rarely	Cannot Evaluate
Accepts responsibility for learning				
Works well with peers				
Accepts personal responsibility for actions				
Demonstrates interest beyond the classroom				
Respects authority				
Makes mature decisions				
Motivated to do well in school				

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Part A: Parent Section Part II (To be completed by parent)

**Parent/Guardian Statement
(To be completed by parent)**

1. Why is it important to you for your child to attend Madison Early College?

2. In what ways will you be able to support your child if they are accepted at MECHS?

Students succeed best when the school, the parent, and the student work together.

- I understand that my child's commitment to Madison Early College is for at least one full academic year.
- I agree to make every effort to ensure my child is in school every day.
- I agree to attend and support school functions, if possible.
- I will encourage and expect high academic and behavior standards from my child.
- I agree and expect my child to abide by the rules and policies of Madison County Schools and AB-Tech Community College.

By signing below, I am certifying that the information provided above is accurate. Inaccurate information may result in dismissal from MECHS if accepted.

(Parent/Guardian Signature)

(Date)

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Part B: Student Section (To be completed by student)

Student Name _____ Student # _____

Age _____ Birth date _____ SS # _____

1. Answer the following questions:

- | | | |
|--|-----|-----|
| | Yes | No |
| A. Do you currently use a planner to keep yourself organized? | () | () |
| B. Have you ever considered dropping out of school? | () | () |
| C. Are you willing to participate in the community service and work based internships required of all Madison County MECHS students? | () | () |

2. Check the characteristics that best describe you.

creative	independent thinker	readily accepts authority
shy	strong leadership skills	hard worker
friendly	misunderstood	determined
flexible	loner	risk taker
able to walk away from conflict	team player	dependent
disconnected from traditional school settings	intolerant	indifferent
works until job is completed	self-confident	gives up easily
uses good judgment	dependable	indecisive
allows for imperfection	mature	self-directed

3. What is your career plan?

4. Why is Madison Early College the right choice for you?

5. What are your strengths and weaknesses as a student?

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Part C: Parent Agreement and Signature Page
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1. We understand that participation in my child’s education will help his/her achievement and attitude. Therefore, we will voluntarily be involved in the school to promote school-wide parent support, shared decisions, special enrichment, and recreational activities. We agree to be accessible and readily available to the school to discuss my child. We understand that strict adherence to all Madison County Schools’ and AB-Tech Community College’s policies is required.

2. By signing below, we acknowledge that all information is accurate and complete as stated within this application and recognize that **acceptance to Madison Early College High School requires a one-year commitment.** We understand that Madison Early College operates on a college campus and that students are expected to be responsible members of the community. Any attendance or behavior problems could be sufficient cause to rescind any assignment/agreement to attend Madison Early College High School.

3. By signing below, I agree for my child’s picture to be used on the internet and or any material used for publicity for the Early College

4. By signing below, I understand that if a net book is assigned to my child it is for use at school only.

5. **Authorization to Disclose:** By signing below, we recognize that because Madison Early College students are dually enrolled, Madison County Schools and AB-Tech Community College must share student information with one another. We authorize disclosure of pertinent information, including but not limited to education plans, needed accommodations, test scores, and grades.

6. **PLEASE READ CAREFULLY:** By submitting this application, I understand the commitment of effort and time that I and my child will be undertaking if accepted into Madison Early College. This commitment includes agreeing to keep my child in the school for at least one academic year. If, at the end of any high school year, my child is unwilling or unable to continue studies in the Madison Early College, he/she will be reassigned to Madison High School. Also, any attendance or behavior problems may be sufficient cause to rescind assignment to the Madison Early College at any time during the school year.

Parent/Guardian printed name

Date

Parent/Guardian Signature

Date

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Part D: Student Agreement and Signature Page

Student Commitment Statements:

I, _____, understand that being admitted to Madison County Early College High School is privilege and an opportunity to extend my educational opportunities for success. By signing below, I am committing to at least one year of attendance at MECHS.

I understand that this is an adult educational setting, and as such, my behavior must be conducive to learning without disruption. I will act as a young adult while using these facilities. I will abide by the rules and regulations established by MECHS and AB-Tech Community College Student Code of Conduct.

I understand that daily attendance is my responsibility and essential to my success. It has been made clear to me that chronic non-attendance could result in termination from Madison Early College High School.

I understand that lack of effort or disruption of the educational process could result in termination from Madison Early College High School.

By signing below, I understand that the net book assigned to me is for use at school only.

Release of Information: I agree as a Madison Early College student, regardless of my age, that AB-Tech Community College may release information regarding my enrollment, academic progress, discipline matters or attendance to my parent(s) or legal guardian(s). Please see the student Handbook or the Student Information section of the College website for more information regarding student rights and disclosure of information under the Family Educational Rights and Privacy Act (FERPA).

Student's Printed Name

Date

Student's Signature

Date

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Part E: Complete Student Information/Student Signature Only



340 Victoria Road, Asheville, NC 28801

For Office Use: ABTech ID# _____	For High School Use: PowerSchool # _____ SS# _____
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**Career & College Promise Application for Admission for Cooperative Innovative High School Students
 Career Technical Education Certificate or College Transfer Pathway**

PLEASE PRINT IN BLACK OR BLUE INK Application Term: 2016SP

STUDENT INFORMATION				
Last Name	First Name		Middle Name	
Street Address	City	County	State	Zip Code
Home Phone	Cell Phone	Email Address		Date of Birth <input type="checkbox"/> Male <input type="checkbox"/> Female
Ethnicity: (Please select one.) - Optional <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino		Race: (Please select all that apply.) - Optional <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Other		
College Educational Goals: (Please select one.) <input type="checkbox"/> Transfer Credit to College <input type="checkbox"/> Personal Enrichment <input type="checkbox"/> Degree, Diploma or Certificate <input type="checkbox"/> Goal Unknown <input type="checkbox"/> Enhance Present Skills		Current Employment Status: (Please select one.) <input type="checkbox"/> Unemployed, not seeking employment UN <input type="checkbox"/> Employed 11-20 hours/week E2 <input type="checkbox"/> Unemployed, seeking employment US <input type="checkbox"/> Employed 21-39 hours/week E3 <input type="checkbox"/> Employed 1-10 hours/week E1 <input type="checkbox"/> Employed 40+ hours/week E4		
Highest educational level completed by your father: (Please select one.) <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> GED <input type="checkbox"/> 13 Adult High School Diploma <input type="checkbox"/> Post High School Vocational <input type="checkbox"/> 15 Associate's Degree <input type="checkbox"/> 16 Bachelor's Degree <input type="checkbox"/> 17 Master's Degree or Higher				
Highest educational level completed by your mother: (Please select one.) <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> GED <input type="checkbox"/> 13 Adult High School Diploma <input type="checkbox"/> Post High School Vocational <input type="checkbox"/> 15 Associate's Degree <input type="checkbox"/> 16 Bachelor's Degree <input type="checkbox"/> 17 Master's Degree or Higher				
EMERGENCY CONTACT INFORMATION				
Name		Phone #:	Relationship	
HIGH SCHOOL INFORMATION				
High School: <input type="checkbox"/> BC Early College <input type="checkbox"/> Buncombe Discovery Academy <input type="checkbox"/> MC Early College <input type="checkbox"/> BC Middle College <input type="checkbox"/> SILSA _____ AA (A10100) _____ AS (A10400) <input type="checkbox"/> Madison, NC iRIS		What year will you be when you begin taking A-B Tech classes: Check One: Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/>	HS Graduation Date: _____/_____/_____ Month / Year	

Principals' signature: _____ Date: _____

Students' signature: _____ Date: _____

Revised 02/09/15

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Part F: Commitment Statement

**Madison Early College High School
Application 2017-2018**

The undersigned student is applying for acceptance with MECHS and agrees to abide by the rules and expectations set by Madison County Schools and AB-Tech Community College. The MECHS program will require commitment and effort for a minimum of one academic school year. If at the end of any high school year a MECHS student is unable or unwilling to continue studies at MECHS, he/she will be reassigned to Madison High School. Madison Early College students must adhere to AB-Tech Community College and Madison County Board of Education policies. By signing and submitting this application the parent(s)/legal guardian(s) and the student understands that behavior or attendance problems will be sufficient cause to be withdrawn from MECHS.

Is Madison Early College the right place for you?

- Madison Early College is a four or five year program.
- Students can earn a high school diploma, ABTCC certificate, an Associate Degree, or transferrable college credit
- Students will be taking college courses beginning in their first year.
- Students often work in teams on projects and presentations.
- Learning is assessed non-traditionally as well as by standardized tests.
- Students will participate in many off campus learning activities.
- MECHS students are eligible to participate in the Madison High School athletic program.

Commitment Statement: We understand and accept the above information. We understand that Madison Early College High School requires a substantial commitment and that signing this document is an agreement of commitment to MECHS program.

We understand that MECHS students are subject to all applicable policies set forth by Madison County Schools and AB-Tech Community College.

Parent Signature: _____

Date: _____

Student Signature: _____

Date: _____

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Part H: Recommendations (2 Required)

MECHS

Student Recommendation Form

Student Name: _____

Student: Please request one of your current teachers to complete this form. **Two teacher recommendation forms are required.**

Teacher: Please complete this form and return it to the student in a sealed envelope with your name written across the back flap.

Please evaluate the applicant on the following characteristics:

Academic Characteristics

	Often	Occasionally	Rarely	Cannot Evaluate
Accepts responsibility for learning				
Makes decisions independent of peers				
Works well with peers				
Communicates effectively				
Follows through on homework and study				
Participates in class discussion				
Accepts academic challenges				
Shows leadership capacities				
Seeks academic challenges				
Shows respect for authority				
Works independently				

Social/Emotional Characteristics

	Excellent	Acceptable	Needs Improvement	Cannot Evaluate
Attitude towards school				
Social skills				
Judgment and common sense				
Maturity				
Responsibility				
Leadership				
Motivation				
Integrity/Honesty				
Confidence				
Self-directed				
Classroom Behavior				

Based on my experience with the applicant, my recommendation to Madison Early College is as follows:

Highly Recommend Recommend Recommend with reservations Do not recommend

Name (please print): _____

Title: _____

Signature: _____

Date: _____

Note to Teachers: We value your opinion. If you have any questions, please contact us at 689-9552. Additional comments may be written on the back if needed. **Thank you very much for your assistance!**

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Social/Emotional Characteristics

	Excellent	Acceptable	Needs Improvement	Cannot Evaluate
Attitude towards school				
Social skills				
Judgment and common sense				
Maturity				
Responsibility				
Leadership				
Motivation				
Integrity/Honesty				
Confidence				
Self-directed				
Classroom Behavior				

Based on my experience with the applicant, my recommendation to Madison Early College is as follows:

() Highly Recommend () Recommend () Recommend with reservations () Do not recommend

Name (please print): _____

Title: _____

Signature: _____

Date: _____

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