

Application DEADLINE: Wednesday, March 2, 2016

ECMC Student Application

Application Process

- 1. Each public school student in Muskegon County has the opportunity to apply for ECMC admission during their sophomore year of high school.
- 2. Student applications will be reviewed by a MAISD and MCC staff members. Students asked to move forward in the application process will attend an Early College interview with a parent/guardian— after which final admissions decisions will be made.
- 3. Qualified students selected from each school will be required to attend the Summer College Success Camp and enroll in the College Success Course (CSS-100) within the following fall or winter semester. Failure to do so will eliminate them from the Program.
- 4. Fall college classes at MCC begin in late August



| Student Application for the 2016-20 | o17 School Year | PLEASE WRITE/PRINT CLEARLY>> |
|--|--|--|
| Last Name | First/Middle _ | |
| Birthdate/ | / Age | _ Gender |
| Name(s) of Parent/Legal Guardian v | vith whom the student resides (| if last name different, please note): |
| Home Address(Street) | | |
| (City) | (Sta | te) (Zip) |
| Phone – Mother (home) | (work) | (cell) |
| Phone – Father (home) | (work) | (cell) |
| Parent email address (required) | | |
| High School | Public | Charter |
| Parent/Student Signature ar | nd Agreement | |
| I understand that my participation in m program. Therefore, I will voluntarily be support, shared decisions, special enrice available to the school to discuss my ch ECMC requires a commitment through and campus activities, he/she will be income. | e involved in the Early College of M hment and recreational activities. ild's progress and development. I u the fifth year (grade 13). While my | luskegon County to promote parent I agree to be accessible and readily understand that acceptance into the student may participate in college clubs |
| I also understand that attendance and f These activities will include both ECMC College's College Success Seminar (CSS | College Success Camp and enrolln | nent into Muskegon Community |
| I also understand that acceptance into t Standards set by Muskegon Communit result in his/her dismissal from ECMC. | | ld must adhere to the Campus ed. Failure to meet those standards may |
| By signing this form, I authorize Early C pertinent high school records. | college of Muskegon County to acce | ess my child's EDP as well as other |
| Parent/Guardian Signature | Date | |
| Student Signature | Date | |



Student Information Release Authorization

| rel | tudent printed name)ease information contained in donly under the conditions s | n my student record to | authorize Muskegon Community College to the individual(s) or organization(s) listed below |
|---|--|----------------------------|---|
| 1. Name of person or organization and address t | | | om disclosure is to be made: |
| | ECMC Staff Dean of Students Early College Mentor(s | | |
| | High School District Staff High School Counselor High School Principal High School Business/F | inance Office | |
| Parent/Guardian/Other | | | |
| | | | |
| | | | |
| | | | |
| 2. | | nay include but is not lir | nited to college records, schedules, grades, ots, billing and academic plans. |
| 3. | The purpose for disclosure To allow ECMC staff to | | pport services |
| Stu | udent Signature | | ate |
| — Pai | rent Signature | | ate |

 ${\it Unless otherwise requested, this authorization ends upon your with drawal or graduation from {\it ECMC}.}$



Application Essay

As part of the application process, students must write and submit a one-page essay.

Please address 3 of the following questions for our evaluation committee:

- Why do you feel that the ECMC program would be a good fit for you?
- How do you currently prepare for assignments and exams in high school?(please describe)
- Describe a situation in which you may have to prioritize Early College over other things (exsports, band, youth group, etc.)?
- What challenges do you think you will face as a participant?
- What is one thing that sets you apart academically from other students your age?

In addition to the specific questions above, this writing assignment will be judged on:

- How well it is written (organization, language, style, grammar, spelling, punctuation, etc.)
- Your passion for entering both ECMC and pursuing your career.

Early College of Muskegon County

Student evaluation and entrance into the ECMC program will be based on criteria in five categories.

Criteria

| High School graduation progress |
|---------------------------------|
| Test scores |
| Teacher Progress Report |
| Application essay |
| Risk Factors |
| TOTAL |

To be eligible to apply to ECMC students must have:

- A high school **GPA of 2.5** or higher
- Completed all Michigan Merit graduation requirements by the end of their junior year (with the exception of ELA 12, the final Math requirement and the online learning experience)
- Received qualifying scores * (Reading 76, Writing 80) on MCC COMPASS Placement Test (excluding Math) *Students may still be considered for program admission on a probationary basis if unable to meet COMPASS benchmarks.
- Completed and submitted all ECMC application forms to their local high school counselor (home school students must submit forms to ECMC staff directly). See checklists below and please <u>submit together in this order</u>: SEE CHECKLIST SHEET on next page



ECMC APPLICATION CHECKLIST

(All items below must be included in order to be considered a completed application)

| Completed by | HS Staff: |
|--------------|---|
| □ Tra | nscript |
| □ HS | Counselor Recommendation Sheet |
| □ Tea | acher Progress Report |
| Completed an | d submitted by students and parent/guardian: |
| □ EC | MC Application |
| | C New Student Online Application Infirmation page (see link below) In https://ac.muskegoncc.edu/secure/createAccount.aspx (to create a new account and apply) |
| □МС | C COMPASS Test Results Printout Sheet |
| C | (must be included to apply) Call 231-777-0394 to make COMPASS test appointment |
| □ Ар | plication essay |
| □ FE | RPA student release form |



COMPASS: READING WRITING

Test Scores

| To be filled out by your high school counselor (COMPASS Math scores not needed for ECMC applica |
|---|
|---|

| test on the campus of Muskegon Community College. Category | Applicable (x) |
|---|-------------------|
| Free and Reduced Lunch | |
| First Generation College Student | |
| Curriculum Limitations | |
| English Language Learner | |
| Single Parent Household | |
| Homeless | |
| Other: | |
| Are there any additional classes this student has taken? | |
| What extra-curricular or volunteer activities is this student involved ir | n? |



ECMC Counselor Form

Thank you for taking the time to complete a recommendation for a prospective student at the Early College of Muskegon County located on the campus of Muskegon Community College. Counselors: Please include this form the completed application and your signature.

| To be completed b | y HS Counselor: | | | |
|---|-----------------|---------|---------|-------------|
| Student Name: | | | | |
| Counselor Name: | | | | |
| Counselor email: | | | | |
| Signature: | | | | |
| How long have you knowr In what capacity? Please rate the student in | | | | Exceptional |
| Academic capability to succeed in Muskegon Community College courses | Evacuation | Average | Average | |
| Levels of personal commitment to academic achievement, perseverance and effort | | | | |
| Self-discipline & initiative, willing to take responsibility for one's own behavior/learning | | | | |



Optional Recommendation Form

| | ons with the student and how you think he/she will ronment. Please also describe any characteristics which its. |
|---|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Based on my experience with the applicant, my o | overall recommendation for this student is as follows: |
| Highest Recommendation | |
| Recommendation | |
| Recommendation with reservation | |
| ☐ Do not recommend | |
| | |
| Name | |
| | |
| Title | |
| School/Organization | |
| Phone E | Email |
| | |
| Signature | Date |



COMPASS Test Information:

Call 231-777-0394 ASAP to make a testing appointment at Muskegon Community College

You only need to take the Reading and Writing sections – NOT MATH.

| Important dates/notes: | |
|--|--------------------------------------|
| My Testing Appointment: | |
| DATE: | |
| TIME: | |
| LOCATION: | |
| What to bring: Photo ID, and all students must als | so know their Social Security Number |
| NOTES: | |
| | |
| | |
| | |
| | |



Additional Comments:

Teacher Grade Update-Class progress information

| 1 st Hour-Teacher | 4 th Hour-Teacher |
|-----------------------------------|-----------------------------------|
| Grade | Grade |
| Attendance | Attendance |
| Attitude-Scale 5-1 (5 is highest) | Attitude-Scale 5-1 (5 is Highest) |
| | |
| 2nd Hour-Teacher | 5 th Hour-Teacher |
| Grade | Grade |
| Attendance | Attendance |
| Attitude-Scale 5-1 (5 is highest) | Attitude-Scale 5-1 (5 is highest) |
| | |
| 3rd Hour-Teacher | 6 th Hour-Teacher |
| Grade | Grade |
| Attendance | Attendance |
| Attitude-Scale 5-1 (5 is highest) | Attitude-Scale 5-1 (5 is highest) |
| | |