

Early College Initial Application

Springfield Technical Community College and the Springfield Empowerment Zone have created a unique opportunity for students to have the opportunity to enroll in STCC credit courses. Students may take up to 20 college credits within specified Career Pathways. Courses are offered at no cost to students. Students are not committed to attending STCC upon high school graduation. Please complete the following form if you are interested in applying to this program.

PLEASE PRINT NEATLY!!!!

SCHOOL CURRENTLY ATTENDING: COMMERCE SPRINGFIELD HONORS ACADEMY

Name: _____
Last First Middle

Permanent Legal Address: _____
Street City State Zip

Home Phone: (____) - _____ - _____ Cell Phone: (____) - _____ - _____

Email Address: _____

Mailing Address: _____
(if different from legal address) Street City State Zip

Male Female SS# - -

Birth Date - -
month day year

MASSACHUSETTS RESIDENCY STATEMENT

Massachusetts residents must complete the residency statement.

I have been a Massachusetts resident for six continuous months and intend to remain here.

As proof of my intent to remain in Massachusetts, I possess at least two of the following documents, which I shall present to the institution upon request. These documents* are dated within one year of the start date of the academic semester for which I seek to enroll (except possibly for my high school diploma). The institution reserves the right to make any additional inquiries regarding the applicant's status and to require submission of any additional documentation it deems necessary. Please check-off those documents you possess as proof of your intent to remain in Massachusetts.

- | | | |
|--|--|---|
| <input type="checkbox"/> Valid driver's license | <input type="checkbox"/> Utility bills* | <input type="checkbox"/> Employment pay stub* |
| <input type="checkbox"/> Valid car registration | <input type="checkbox"/> Voter registration* | <input type="checkbox"/> State/Federal tax returns* |
| <input type="checkbox"/> Mass. high school diploma | <input type="checkbox"/> Signed lease or rent receipt* | <input type="checkbox"/> Military home of record* |
| <input type="checkbox"/> Record of parent's residency for unemancipated person* | <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> I am an eligible participant in the New England Board of Higher Education's Regional Student Program. | | |
| <input type="checkbox"/> I am a member of the armed forces (or spouse or unemancipated child) on active duty in Massachusetts. | | |

Have either of your parents graduated from a four-year college? Yes No

ETHNIC AND RACE INFORMATION (This information is used for statistical purposes only and is optional.)

Please check one:

- Hispanic or Latino
 Not Hispanic or Latino

Please check one or more of the following:

- American Indian or Alaska Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White

IMPORTANT NOTICES!

1. Students must be in the 10th grade for the current school year to participate I this program.
2. Mandatory Orientation will be held on January 7, 2020 at STCC (Snow Date, January 14)
3. The students will be enrolled for FYE-100 (First Year Experience0 at STCC. Classes start on Januare ry 21, 2020.
4. Students will walk from Commerce to STCC for class. Class will begin after 12:30 p.m. Exact time e TBD.
5. There is no charge for taking this class.
6. Students will be assigned an Advisor to assist them in being successful students.
7. Course grades will become part of the student's college records at STCC.
8. Students will be subject to the STCC Student Code of Conduct.
<https://catalog.stcc.edu/content.php?catoid=21&navoid=3911>
9. In order to move onto a Career Pathway Program and take more classes at STCC, student must successfully complete the FYE100 Course. A second application process will begin in March 2020 for the Career Pathways.

STUDENT: I certify that all information stated on this application is accurate and complete.

Student: _____ Date: _____

PARENT/GUARDIAN: I grant permission for my child to participate in the Early College Program at Springfield Technical Community College. I am aware that my student is responsible for getting to STCC to participate in class and take advantage of campus support services. I am responsible for ensuring my child gets home or to their designated, after-school location. I have read and understand the IMPORTANT NOTICES listed above.

Please Print Name: _____

Parent Signature: _____ Date: _____

Guidance Counselor:

Please complete the following. Our signature certifies that the named student is currently enrolled, is a student in good standing, and/or you approve of their enrollment in the program.

SASID# _____ Student's Current GPA: _____

Student absences: 2018/1029 _____ 2019/2020 _____

Will school award high school credit for STCC coursework: Yes _____ No _____ To Be Determined _____

SIGNATURE: _____