



ECMC APPLICATION CHECKLIST

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

To be completed by Student and Parent/Guardian:

- Early College Application Checklist
- Review Application Process and Program Eligibility
- One Page Essay (follow attached instructions)
See Program Eligibility, Essay & Evaluation Criteria page for details.
- Early College Student Application
- FERPA Student Release Form
- Photo Release Form

- MCC Application Steps (follow attached instructions)
- MCC Placement Test Information Sheet
Call 231-777-0394 to make testing appointment.
- MCC Placement Test Results Sheet

To be completed by High School Counselor:

- HS Counselor Form and Transcript

To be completed by High School Staff or Other:

- Recommendation Form #1
- Recommendation Form #2



APPLICATION DEADLINE: Friday, March 20, 2020

Early College Muskegon County (ECMC) Student Application Process

1. The Early College of Muskegon County program is a partnership between Muskegon Area Intermediate School District (MAISD) and Muskegon Community College (MCC). All classes are held at MCC.
2. Each public school student in Muskegon County has the opportunity to apply for ECMC admission during their sophomore year of high school.
3. Student applications will be reviewed by MCC staff members. Students moving forward in the application process will attend an Early College interview with a parent/guardian. Admission decisions will be made and disclosed to applicants within two weeks after the interview process.
4. Students selected from each school will be required to attend the Early College Summer Orientation Camp and enroll in the College Success Seminar (CSS-100) during the fall semester.
5. Fall college classes at MCC begin in late August.



Program Eligibility, Essay Criteria & Evaluation

To be eligible to apply to ECMC students must have/be:

1. A high school **GPA of 2.5** or higher.
2. On track to meet their HS graduation requirements.
3. Received **qualifying scores *(Reading 250, Writing 255) on MCC Placement Test** (excluding Math) **Students may still be considered for program admission on a probationary basis if unable to meet Placement Test benchmarks.*
4. Completed and submitted all ECMC application forms to: ECMC staff or their local high school counselor. SEE APPLICATION CHECKLIST (page 1) to ensure the application is complete.

As part of the application process, students must type 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 (ex: sports, band, youth group, etc.)
- What challenges do you think you will face as a high school/college student?
- What is one thing that sets you apart academically from other students your age?

This writing assignment will be evaluated on:

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

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

Criteria

High School Graduation Progress
MCC Placement Test Scores
Recommendations
Application Essay
Risk Factors
Interview



Student Application for the 2020-2021 School Year << PLEASE WRITE/PRINT CLEARLY>>

Last Name First/Middle
Birthdate / / Age Gender Male Female

Race/Ethnicity – Choose one below

- American Indian or Alaska Native, not Hispanic
- Asian or Pacific Islander, not Hispanic
- African American, not Hispanic
- Caucasian, not Hispanic
- More than one race
- Hispanic

Name(s) of Parent/Legal Guardian with whom the student resides (*if last name different, please note*):

Home Address
(Street) (City) (State) (Zip)

Phone – Mother (work) (cell) Student (cell)

Phone – Father (work) (cell)

Parent email address Student email

High School

Parent/Student Signature and Agreement

I understand that acceptance into the ECMC requires a commitment through the fifth year (grade 13). I agree I will partake in my child’s education and their attendance/full participation will determine the likelihood of their success in the program. The required student activities outside of the classroom are: College Success Camp, seminars and monthly update meetings. I also understand that acceptance into the school is a privilege and my child must adhere to the campus standards set by Muskegon Community College in order to remain enrolled. Failure to meet those standards may result in his/her dismissal from ECMC. I agree to be accessible and readily available to the school to discuss my child’s progress.

By signing this form, I authorize Early College of Muskegon County to access my child’s pertinent high school records.

Parent/Guardian Signature

Student Signature

Date

Date



FERPA
Student Release Form

I (student printed name) _____ authorize Muskegon Community College to release information contained in my student record to the individual(s) or organization(s) listed below and only under the conditions stipulated.

ECMC Staff

Dean of Students
Early College Mentor(s)

High School District Staff

High School Counselor
High School Principal
High School Business/Finance Office

Parent/Guardian

Other: _____

Type of information to be disclosed:

- All information which may include but is not limited to college records, schedules, grades, attendance, faculty communications, transcripts, billing and academic plans.

The purpose for disclosure of information:

- To allow ECMC staff to provide appropriate support services.

Student Signature

Date

Parent/Guardian Signature

Date

High School

MCC Student ID Number

Unless otherwise requested, this authorization ends upon your withdrawal or graduation from ECMC.



Photo Release Form

Thank you for sharing your story with Muskegon Community College! Your participation will help promote the power of higher education and is beneficial to overall promotional efforts. Please read the information below and complete the form to provide permission to use your testimonial/story and/or likeness in our marketing materials. If you have questions, please contact Community Relations at: communityrelations@muskegoncc.edu.

Release to Use Photo/Video/Audio/Story

I hereby grant permission to Muskegon Community College to use my image and/or likeness and/or voice and/or story for any promotional purposes. I understand that my likeness/voice/story may be used in print material, on websites, or any other communication materials. I acknowledge MCC's right to use stock images of other people along with my story and/or name and that MCC may crop or treat any image, video, audio, or my story at its discretion. I also understand that once my image/story is posted on any of MCC's website, the information and/or image can be downloaded by any computer user. I acknowledge that MCC may choose not to use my likeness/voice/story at this time, but may do so at its own discretion at a later date. I confirm that my testimony, story, and other information provided was done by my own free will and that I was not coerced in any way. I agree to indemnify and hold harmless from any claims:

- Muskegon Community College and any/all of its departments
- Staff members of Muskegon Community College and any/all of its organizations
- Trustees of Muskegon Community College and any/all of its organizations
- Muskegon Area Intermediate School District and any/all of its departments

Full Name: _____

Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Name for publication (*if different than above, for example "JB", "John B.", "John"*):

Address: _____

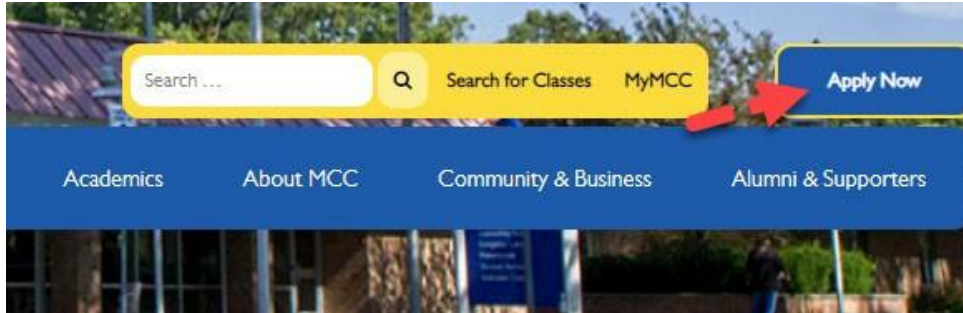
City: _____ ST: _____ Zip: _____

Phone: _____ Parent/Guardian Email: _____

Notes: _____

Steps to apply to MCC

1. www.muskegoncc.edu/apply
2. Click **Apply Now** in upper right hand corner



3. Click **Apply Now** again in the center of the page

Apply to MCC



4. Click on “Do not have an account? Create an application account!”

A screenshot of a login and application account creation form. At the top left is a blue button with white text that says 'Log In'. Below it are two input fields: 'Email: *' and 'Password: *'. Below the password field is another blue button with white text that says 'Log In'. At the bottom of the form, there is a link that says 'Do not have an account? Create an application account!' which is highlighted with a red box and a red arrow. Below this link is a smaller link that says 'Forgot your password or is your account locked? Click here for assistance.'

5. Fill out the form
 - a. Use your **legal** first and last name
 - b. Use a **personal email address** (PLEASE DO NOT USE YOUR HIGH SCHOOL EMAIL ADDRESS)

6. High School Section

- a. Enter the name of your high school in the **Organization Name** section
- b. Country = United States
- c. State = Michigan
- d. City = Muskegon (optional)
- e. Click Search

Organization Name (full or partial)

Orchard View

Country

United States ▼

State/Province

Michigan ▼

City (full or partial)

Muskegon

Search Cancel

- f. Results will populate, please select from the list

Results Found:

Select an organization ▼

Select an organization

The organization is not listed

Orchard View High School - 232706 (Muskegon, Michigan, United States)

- g. Click the name of the high school and click **SELECT**

7. The **start term** is the term in which you will be STARTING classes

8. Additional Information

- a. Admit Type = **Early College**
- b. Academic Program of Interest = **High School Guest *Not Eligible for Financial Aid**

Early College ▼

Academic Program of Interest *

High School Guest *Not Eligible for Financial Aid ▼

9. Create a password that you will be able to remember

10. Click on Create Account

11. Please review the information you have input on the application and add in anything that is missing

12. Academic Plans

- a. Enter Start Term
- b. Admit Type = Early College**
- c. Select Academic/Career Interest
- d. Academic Program of Interest = High School Guest *Not eligible for financial aid**
- e. Enter graduation year

13. Click Save & Continue

14. Review the application and if everything looks correct check the boxes and sign your name

15. You have now applied to Muskegon Community College!!! You will receive an acceptance letter via **email** in 24-48 business hours.



Counselor Form

Thank you for taking the time to complete a recommendation for a prospective Early College of Muskegon County student.

Counselors: Please include this form with the completed application and your signature.

To be completed by HS Counselor:

Student Name:	_____
Counselor Name:	_____
Signature:	_____

High School Transcript Included

Attending Career Tech Center (CTC)

How long have you known the student? _____

What extra-curricular or volunteer activities is this student involved in? _____

Which degree is the student interested in? ASA or Accelerated Technical Institute (ATI)

Please rate the student in terms of the following attributes and indicate any at-risk factors below:

	<i>N/A</i>	<i>BeLow Average</i>	<i>Average</i>	<i>Above Average</i>	<i>Exceptional</i>
Academic capability to succeed in Muskegon Community College courses					
Levels of personal commitment to academic achievement, perseverance and effort					
Self-discipline & initiative, willing to take responsibility for one's own behavior/learning					

At-Risk Factors

<i>Category</i>	<i>Applicable (x)</i>
Free and Reduced Lunch	
First Generation College Student	
English Language Learner (ELL)	
Single Parent Household	
Homeless	
Disability (IEP or 504 Plan)	

MCC Placement Test Results

Reading _____

Sentence Skills _____





Recommendation Form

In the box below, briefly describe your interactions with the student and how you think he/she will respond to a community college education environment. Please also describe any characteristics which set him/her apart from other high school students.

Based on my experience with the applicant, my overall recommendation for this student is as follows:

- Highest Recommendation
- Recommendation
- Recommendation with reservation
- Do not recommend

Name Title

School/Organization

Phone Email

Signature Date





Recommendation Form

In the box below, briefly describe your interactions with the student and how you think he/she will respond to a community college education environment. Please also describe any characteristics which set him/her apart from other high school students.

Based on my experience with the applicant, my overall recommendation for this student is as follows:

- Highest Recommendation
- Recommendation
- Recommendation with reservation
- Do not recommend

Name Title

School/Organization

Phone Email

Signature Date





Placement Test
Information Sheet

**The MCC Placement Test is required as part of the
ECMC Application process.**

- Student must apply to MCC and receive student number prior to scheduling test.
- You only need to take the Reading and Writing sections **NO MATH.**
- Practice test questions are available by using the following link: <http://www.muskegoncc.edu/testing/mcc-placement-test/>
- Testing Center is located at MCC in Room 134. Please bring MCC Student Number & Photo ID.

Call 231-777-0394 to schedule your testing appointment.

My Testing Appointment:

DATE: _____

TIME: _____

**Students are responsible for bringing the results page
to their high school counselor.**

