



Central Vermont Career Center

To be completed by the sending school Counseling Department, student and parent.



CVCC Student ID # _____
YRGR SCH IDENTIFIER

STUDENT INFORMATION

Date of Application: _____ Birthdate: _____ Age 1st day of program: _____
Last Name: _____ Student start date: _____
First Name: _____ Middle: _____ Year of Graduation: _____
Gender: M F Other: _____ Student Home Telephone: _____
(circle one)
Student Cell Phone: _____ Email: _____

Your grade level on first day of program: 9 10 11 12 13 (Adult with diploma) 15 (Adult without diploma)
(circle one)

Race/Ethnicity (Optional): Black Asian/Pacific Islander Hispanic
 American Indian/Alaskan Native White Other _____

STUDENT'S PHYSICAL ADDRESS (Street, City, Town, ZIP) _____

| | | | | |
|-------------------------------------|------------------------------------|--|---|-------------------------------------|
| Town of Residence: | | <input type="checkbox"/> Barre City | <input type="checkbox"/> Barre Town (Including So. Barre, East Barre, Websterville, Graniteville) | |
| <input type="checkbox"/> Cabot | <input type="checkbox"/> Calais | <input type="checkbox"/> Duxbury | <input type="checkbox"/> E. Montpelier | <input type="checkbox"/> Fayston |
| <input type="checkbox"/> Marshfield | <input type="checkbox"/> Middlesex | <input type="checkbox"/> Montpelier | <input type="checkbox"/> Moretown | <input type="checkbox"/> Plainfield |
| <input type="checkbox"/> Waitsfield | <input type="checkbox"/> Warren | <input type="checkbox"/> Waterbury | <input type="checkbox"/> Other: | |
| Sending School: | | | | |
| <input type="checkbox"/> Cabot | <input type="checkbox"/> Harwood | <input type="checkbox"/> Home Schooled | <input type="checkbox"/> Montpelier | |
| <input type="checkbox"/> Spaulding | <input type="checkbox"/> Twinfield | <input type="checkbox"/> U32 | <input type="checkbox"/> Other: | |

Career Center Programs Offered

If RETURNING STUDENT, please check here:

COOP Student _____

(Name of Program)

Circle one or two programs of your choice.

Automotive Technology
Baking Arts
Building Trades
Cosmetology
Culinary Arts
Digital Media Arts
Electrical Technology

Emergency Services
(Must have documentation verifying ability to lift 50 pounds.)
Human Services
Natural Resources & Sustainable Tech
Plumbing and Heating
Exploratory Tech (Grade 10)

The Central Vermont Career Center does not discriminate on the basis of sex, race, color, national origin, religion, disability, sexual orientation, gender identity, and marital status in admission or access to, or treatment or employment in, its programs and activities.

Two Prog Visit _____

Entered In: _____ Infinite Campus _____ Admissions DB _____ Count

CENTRAL VERMONT CAREER CENTER

155 Ayers St., Barre, VT 05641-4300 * 802-476-6237 * FAX: 802-476-4045 * www.cvtcc.org

Student Application Information Continued

PARENT/GUARDIAN INFORMATION

Student lives with: Contact First

| | | |
|---------------|----------------------|------------------------|
| _____ | Relationship: _____ | Mailing Address: _____ |
| Name | Daytime Phone: _____ | _____ |
| _____ | Home Phone: _____ | Cell Phone: _____ |
| Email Address | | |

Contact Second:

| | | |
|---------------|----------------------|------------------------|
| _____ | Relationship: _____ | Mailing Address: _____ |
| Name | Daytime Phone: _____ | _____ |
| _____ | Home Phone: _____ | Cell Phone: _____ |
| Email Address | | |

STUDENT QUESTIONS

TO BE COMPLETED BY STUDENT.

This is an important part of your application.

Please answer questions completely. If you need more space please attach a separate sheet.

Please explain your current career goal, your post high school career plan , and how your personal learning plan supports your goals below:

List three words that you might use to describe yourself as a student:

Did your interest in this program arise from a visit to the Career Center program, a presentation, a relative or friend who works in this career, your own prior experience, or in some other way?

To be successful in a Career and Technical Ed Program, you will be expected to follow all safety procedures and pass a Safety Assessment within the first few weeks of school. Do you think you can meet this requirement?

CVCC programs have safety risks due to the nature of the equipment and tools used in those programs. We understand that care, caution and appropriate behavior are necessary to ensure a safe environment for oneself and others.

| | | | |
|-------------------|-------|---------------------------|-------|
| _____ | _____ | _____ | _____ |
| Student Signature | Date | Parent/Guardian Signature | Date |

Central Vermont Career Center

Student Application Information Continued

MEDIA RELEASE

With this submission, I give the Central Vermont Career Center the absolute right and permission with respect to the photography/videography they may take of me, or in which I may be included with others, in this Center.

I understand CVCC will not publish my photographs or videos. I hereby waive any right that I may have to inspect or approve the finished photograph or the use to which it may be applied and release CVCC from any and all claims, including claims for libel.

I give permission for my child's image to be used: YES _____ NO _____

Student Signature

Date

Parent/Guardian Signature

Date

PLEASE COMPLETE

STUDENT ATTENDED:

Open House at CVCC _____

Middle School Presentation _____

CVCC Presentation at your school _____

CVCC Two Program Visit _____

Rosie's Girls _____

Women Can Do Conference _____

O V E R ----->

Central Vermont Career Center

Educational Information (to be completed by Counselor)

Student's Name _____ Grade Upon Entering _____
Last First Middle

Program _____

Counselor's Name(s) _____ Phone _____

Sending High School _____

Please **include copies** of the following with the application:

1. TRANSCRIPT (*Updated transcript required on all accepted students in June.*)
2. REPORT CARD (most recent)
3. PERSONAL LEARNING PLAN
4. GRADUATION PLAN

Please complete the following Endorsement of Educational Planning for CVCC:

_____ is applying for admission to the Central Vermont Career Center

Student Name

for the school year _____ - _____.

Studying at Central Vermont Career Center in the program(s) represented in the application is in line with his/her goals for the future and plan for graduation.

(Counselor Signature)

5. ATTENDANCE REPORT
6. TEST SCORES
7. DISCIPLINE & BEHAVIOR: **Please check ALL that apply:**
(Please provide a hard copy of discipline incidents.)

In or out-of school suspensions within the last year.

Other behavioral concerns:

No behavior or discipline issues.

RECOMMEND (please circle one):

● No Basis ● With Reservation ● Fairly Strongly ● Strongly ● Enthusiastically

I _____ believe that _____ can meet
(Counselor Signature) (Student)

the academic requirements of the program selected and can behave in such a manner as to ensure his/her safety and the safety of others. I verify that we have included the requested records of this student in their entirety.

Note: Special Educators and School Counselors are encouraged to invite the Central VT Career Center's Special Needs Coordinator (802-476-6237 Ext. 1258) to pre-enrollment meetings.