

*Madison Early College High School  
5734 US Highway 25/70  
Marshall, NC 28753  
Phone: 828.649.0319*

*Jennifer L. Caldwell, Principal  
jcaldwell@madisonk12.net  
www.madisonk12.net/mechs  
Fax: 828.649.0691*

**Madison Early College High School**  
**Application for Admission**  
**2023-2024**

Madison Early College High School is a collaborative effort between Madison County Schools and A-B Tech Community College. The early college model provides 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 the early college model. The Madison Early College student will belong to a close 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, brought to the Early College campus, or mailed to Madison Early College at the above address.

**Applications Due By: Friday, May 5<sup>th</sup>, 2023**

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**Part A: Parent Section Part I (To be completed by a Parent/Guardian)**

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				
Attend school regularly				

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

**Parent/Guardian Statement**

1. In what specific ways will you be able to support your child if accepted at Madison Early College High School (MECHS)?
  
  
  
  
  
  
  
  
  
  
2. Do you have any concerns about your child that may cause him/her not to be successful at MECHS and/or A-B Tech?

*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 at least one full semester
- I agree to make every effort to ensure my child is in school every day. Attendance is a crucial component to success.
- 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 policies set by Madison County Schools, Madison Early College High School, and A-B 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: Parent Agreement and Signature Page**

- 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 A-B Tech Community College’s policies is required.
  - 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-semester commitment.**
  - Any attendance or behavior problems could be sufficient cause to rescind any assignment/agreement to attend Madison Early College High School.
- 
- By signing below, I agree for my child’s picture to be used on the internet and or any material used for publicity for Madison Early College.
  - By signing below, I understand that students will use technology in an appropriate manner.

**Authorization to Disclose:** By signing below, we recognize that because Madison Early College students are dually enrolled, Madison County Schools and A-B 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.

**PLEASE READ CAREFULLY:** By submitting this application, I understand the commitment of effort and time that my child and I will be undertaking if accepted into Madison Early College. If, at the end of any semester, my child is unwilling or unable to continue studies in Madison Early College, he/she could be reassigned to Madison High School.

\_\_\_\_\_ Parent/Guardian Printed Name  
Date

\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_ Date

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<b>Part C: Student Section (To be completed by student)</b>
---

Student Name \_\_\_\_\_ Student # \_\_\_\_\_

Age \_\_\_\_\_ Birth date \_\_\_\_\_ SS # \_\_\_\_\_

1. Answer the following questions:

- |  | Yes | No  |
|--|-----|-----|
| A. Do you understand how important attendance is?  | ( ) | ( ) |
| B. Are you willing to participate in community service and/or work-based internships required of all MECHS students? | ( ) | ( ) |
| C. Are you willing to participate in challenge-based learning (CBL)?   | ( ) | ( ) |

2. What are your career goals?

3. Why is Madison Early College High School the best choice for you?

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

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<b>Part D: Student Agreement and Signature Page</b>
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Student Commitment Statements:

I, \_\_\_\_\_, understand that being admitted to Madison County Early College High School is a privilege and an opportunity to extend my educational opportunities for success. By signing below, I am committing to at least one semester 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 A-B 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 non-attendance could result in termination from Madison Early College High School.

I understand that work ethics and attendance are essential for success at MECHS and A-B Tech. Making an effort, asking for help, trying new strategies, etc. on a consistent basis in every class at MECHS and A-B Tech are required skills.

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

**Release of Information:** I agree as a Madison Early College student, regardless of my age, that A-B 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: Commitment Statement**

**Madison Early College High School**  
Application 2023-2024

The undersigned student is applying for acceptance with MECHS and agrees to abide by the rules and expectations set by Madison County Schools and A-B Tech Community College. The MECHS program requires commitment and effort. If at the end of any semester a MECHS student is unable or unwilling to continue studies at MECHS, he/she could be reassigned to Madison High School. Madison Early College students must adhere to A-B 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 understand 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 transferable college credit.
- Students will be taking college courses beginning their freshman year.
- Classes are accelerated/honors-level and require a determined attitude, a strong work ethic, and regular attendance.
- Students often work in teams on projects and presentations in class as well as in school-wide Project Based Learning projects.
- Learning is assessed non-traditionally as well as by standardized tests.
- Students will participate in many off campus learning activities including college visits.
- MECHS students are eligible to participate in Madison High School athletic and extra-curricular programs.

**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 A-B Tech Community College.**

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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<b>Part F: Recommendations (2 Required)</b> <b>MECHS Student Recommendation Form</b>
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Student Name: \_\_\_\_\_

**Student:** Please request one of your CORE teachers (ELA, Math, Science, History) 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 (strong work ethic)				
Participates in class discussion				
Accepts academic challenges				
Attendance				
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  
 Concerns? \_\_\_\_\_

Name (please print): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ *Note to Teachers: We value your opinion. If you have any questions, please contact us at 649-0319. Additional comments may be written on the back if needed. **Thank you very much for your assistance!***

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Works well with peers				
Communicates effectively				
Follows through on homework and study (strong work ethic)				
Participates in class discussion				
Accepts academic challenges				
Attendance				
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    Concerns?

\_\_\_\_\_

Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***Note to Teachers: We value your opinion. If you have any questions, please contact us at 649-0319. Additional comments may be written on the back if needed. Thank you very much for your assistance!***

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For Office Use: ABTech ID# _____	For High School Use: PowerSchool # _____
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340 Victoria Road, Asheville, NC 28801

**Career & College Promise Application for Admission for Cooperative Innovative High School Students**

**PLEASE PRINT IN BLACK OR BLUE INK or TYPE** Application Year: \_\_\_\_\_ (ex. 2020-2021)

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.)- Optional <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.)- Optional <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.)- Optional <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"/> BC Middle College <input type="checkbox"/> Buncombe Discovery Academy <input type="checkbox"/> MC Early College <input type="checkbox"/> SILSA ____ AA (A10100)      ____ AS (A10400)      other AAS		What year will you be when you begin taking A-B Tech classes:  Check One: Freshman Sophomore Junior Senior		HS Graduation Date:  <u>06</u> / ____ Month / Year

Principals' signature: \_\_\_\_\_ Date: \_\_\_\_\_

Students' signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Testing

College benchmark testing is required to be eligible to take many, but not all, of the college level classes at A-B Tech. Your College Liaison and School Counselor will assist you in determining whether testing benchmarks are required for courses of interest. While these benchmarks do not have to be met prior to entry into the program, you **must** meet required benchmarks/pre-requisites **before** taking courses for which they are required.

### College Readiness Benchmarks on Approved Assessment Tests (more than one test may be used to meet benchmarks):

Test	PLAN	Pre-ACT	PSAT (2014 or earlier)	PSAT (2015 and later)	SAT (pre- Mar 2016)	SAT (March 2016)	ACT
English	15	18	45	26 / 460	500	480	18
Reading	18	22	47	26 / 460	500		22
Mathematics	19	22	47	24.5 / 510	500	530	22

### Students may also use the following approved Diagnostic Test to meet benchmarks:

Test	NC DAP (NCCCS Cut Score)	Accuplacer (NCCCS Cut Score)	Compass (NCCCS Cut Score)	Asset (NCCCS Cut Score)
Sentence Skills	NCDAP composite score of 151 or higher	86	70 (Writing)	41 (Writing)
Reading		80	81	41
Arithmetic	7 on each assessment for DMA 010 through 060	55	47 (Pre-Algebra)	41 (Number Skills)
Elementary Algebra		75	66	41



Asheville-Buncombe Technical Community College  
 K. Ray Bailey Student Services Building  
340 Victoria Road,  
Asheville, NC 28801  
 (828) 398-7900

**Release of Student Information**

Student ID#: \_\_\_\_\_ Student Name: \_\_\_\_\_

By signing below, I authorize A-B Tech to release information regarding my student record to the individuals listed below. This document will apply to both curriculum and continuing education areas of the College. This includes (but is not limited to) information related to my class schedule, attendance, grades, advising, transitional studies, etc. I understand the individuals below must have my Student ID# in order to conduct any College business on my behalf, and it is my responsibility to provide this number to them. This release replaces all previous authorizations and is in effect from the date signed until I submit a request revising or revoking the release of information.

This form does not include the release of any financial aid information to individuals other than the student. Due to strict federal privacy guidelines related to the security of student financial information, A-B Tech will not release account-specific financial aid information to anyone other than the student.

Information may be released to the following individuals:

Name: \_\_\_\_\_ Relationship to me: \_\_\_\_\_  
 Name: \_\_\_\_\_ Relationship to me: \_\_\_\_\_  
 Name: \_\_\_\_\_ Relationship to me: \_\_\_\_\_  
 Name: \_\_\_\_\_ Relationship to me: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student Signature

Date

<p style="text-align: center;"><u>Office Use Only</u></p> <p>1. Check photo ID (required; form must be submitted by student)</p> <p>2. Scan to Applications/4 Privacy</p>
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