TO: High School Guidance Counselors

FROM: Deborah DiCarlo, Assistant Director of Admissions

DATE: March 30, 2020

SUBJ: Three Rivers Community College – High School Partnership (HSP) Program Scholarship – Fall 2020 Application Procedures for NEW STUDENTS

Please review the following summary of current HSP program application procedures:

1. Up to fifty scholarships are awarded each semester for HSP program recipients. Priority is given to seniors. Fall 2020 - The College will pay the costs of tuition for eligible high school students participating in the program and will waive all fees. Book/supplies and transportation are the student’s responsibility. Eligible High School students may enroll approximately two weeks prior to the start of classes on a space available basis.

2. Only high school juniors or seniors maintaining a 2.7 (80%) GPA (B- grade) or higher are eligible to receive a HSP Program scholarship.

3. Students will be funded for one course per semester, and each high school will have a cap of four new students (does not include continuing students).

4. Three Rivers must receive all application materials, emailed to ddicarlo@threerivers.edu, before the Summer Break. Be sure to attach current high school transcripts, parent consent form and SAT scores (if available) to the recommendation forms.

5. Students are asked to take a Placement Test in order to demonstrate ability to succeed in a college level course. Amid the Coronavirus precautions, we are temporarily not testing. We hope to provide Placement test for students as soon as we are able. Detailed instructions on further information about course registration will be included with a letter sent to eligible students. Submit SAT test scores (if available) and a current high school transcript with the application materials. A Reading test score of 25 or higher or SAT Writing & Language test score of 26 or higher may place students at the college English level.

I encourage students to identify and discuss their choice of courses with you. Alternate courses should be identified in the event their first choice is unavailable. Our Schedule of Fall 2020 classes are available at: www.threerivers.edu/courseschedule. The web schedule will provide you with the latest information about classes including availability.

Also attached are the following materials to assist you in advising interested students:

1. Application and Underage Student Consent Form
2. High School Guidance Counselor’s Recommendation Form

Please feel free to email me at ddicarlo@threerivers.edu if you have any questions about the program or these procedures. We welcome your support of the Partnership Scholarship Program and look forward to receiving your recommendations. Feel free to make additional copies of these materials as needed.

www.threerivers.edu
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THREE RIVERS COMMUNITY COLLEGE
High School Partnership (HSP) Program Scholarship
New Student Application – Fall 2020 (classes begin on August 26)

Fall 2020 - The College will pay the costs of tuition for eligible high school students participating in the program and will waive all fees. Book/supplies and transportation are the student’s responsibility. Eligible High School students may enroll approximately two weeks prior to the start of classes on a space available basis.

Complete the front and back of this Application. Return the Application with your Parent/Guardian Consent form to your Guidance Counselor, before the summer school break.

Have you ever participated in or applied to the College Career Pathways Program?  ____ No  ____Yes

/ /  
(Date of Birth)  / /  
(Social Security Number)  (Gender: M/F)

(SS# is requested for purposes of financial aid, Federal income tax benefits, provision of some College services, accuracy of student records and other business purposes.)

Please print clearly.

NAME:  
Last Name  First Name  MI

ADDRESS:  
Street  or  P.O. Box Number  Apt. Number

CITY:  STATE:  ZIP:  

Home Phone:  Student Cell Phone:

Parent (Guardian) Phone:  
Name  Phone Number

Student Email Address:  

NAME of HIGH SCHOOL:  Year of Graduation:  

CITIZENSHIP – Please check one:

□ American Citizen  □ Permanent Resident (green card)
□ International Student (Student Visa Type F-1)  □ Foreign on another Visa (NOT F-1): Indicate type________

Please provide the following race and ethnic data. This information is requested on a VOLUNTARY basis by the U.S. Department of Education, National Center for Education Statistics. Your answer will not affect admission to or registration in the college.

Ethnicity:  □ Hispanic/Latino
□ Non- Hispanic/Non-Latino
□ Choose not to respond (None)

What is your race?  Choose one or more:

□ White (10)
□ Black or African American (20)
□ Asian (45)
□ American Indian or Alaskan Native (50)
□ Native Hawaiian or Other Pacific Islander (80)
□ Other (90)
□ Choose not to respond (60)
List name and address of parent(s) or legal guardian(s): (Please Print)

Name: ____________________________________________

Address: __________________________________________

   Street                        If you have a P.O. Box Number – please provide

   City                          ______________
   State                        ______________
   Zip                          ______________

BRIEFLY STATE YOUR REASONS FOR WISHING TO PARTICIPATE IN THIS PROGRAM:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

PLEASE INDICATE ALL AREAS OF INTERESTS FOR COURSE SELECTION:

☐ STEM*  ☐ Natural Sciences  ☐ Manufacturing  ☐ Social Science  ☐ Art/Graphic Design

(*science, technology, engineering, math)

Other interests of study: ____________________________________________

Consent for the Disclosure of Educational Records

I understand that to maintain accurate student records, including the records pertaining to my attendance at the College and for other necessary business purposes, the College may need to release or provide access to personally identifiable information in its records pertaining to me to another College in the Community College System or to the System’s administrative office. Accordingly, I hereby authorize the College to release or allow access to such information to those indicated for the purposes described.

Initial: __________

E-Mail Communications

I request the College forward to me at the e-mail address I have provided any correspondence, including personally identifiable information pertaining to me from College records that are protected by Family Educational Rights and Privacy Act (FERPA).

Initial: __________

I certify with my signature below that I am the applicant and that the information I have provided above is accurate. If admitted, I pledge to comply in good faith with all the rules and regulations of the College. I realize that any misleading information provided by me on this application may be cause for dismissal. I understand that information collected in this application is for reporting purposes only and will not be used in the selection process for admission.

APPLICANT’S SIGNATURE: ___________________________ DATE: ______________

PARENT or GUARDIAN SIGNATURE: ___________________________ DATE: ______________

I acknowledge that by signing this application I give TRCC permission to have my photo/image taken and possibly used by the College as a part of its publicity and marketing efforts if I choose to attend. Contact the Registrar’s Office if you have any questions regarding this information.  TR-Registrar@trcc.commnet.edu

Revised 03/30/20
STUDENT NAME: ________________________________________________
Name of High School: ____________________________________________

TO THE GUIDANCE COUNSELOR: (Please provide the following information)

_____ This student is a SENIOR
_____ This student is a JUNIOR
_____ I certify the applicant is maintaining a minimum 2.7 (80%) GPA (B- grade) or higher.

Submit Transcripts and SAT scores (if available) with the Application and this form.

Note: SAT reading test score of 25 or higher or SAT Writing & Language test score of 26 or higher may waive the student from taking the English portion of the placement test.

Indicate areas of study you recommend for this student:

☐ Stem* ☐ Natural Sciences ☐ Manufacturing ☐ Social Science

(*science, technology, engineering, math)

☐ Art/Graphic Design ☐ Other: ________________________________

Your evaluation of the student’s ability to perform well academically and socially in a college course would be very helpful. Please use reverse side of this form for your comments.

Guidance Counselor Information:

________________________________________________________________________
Name

________________________________________________________________________
Signature Date

________________________________________________________________________
Phone (daytime) e-mail

Return this completed form, student’s application, parent consent form, transcript and SAT scores (if available) to us before the end of your Summer Break.

Please note: Our campus is temporarily closed during this unprecedented time of COVID 19. In the interim, please e-mail all applications to ddicarlo@threerivers.edu.

Three Rivers Community College, Admissions Office, 574 New London Turnpike, Norwich, CT 06360
Underage Student Consent Form:

It is essential that parents and their minor children understand that the student is entering a college environment and that carries with it certain possible scenarios, not all of which can be anticipated. College is much more rigorous and much less guided than secondary education course work. The courses taken will establish an official transcript that will follow the student throughout the student’s college and/or university career. Any student who registers for TRCC courses is responsible for maintaining at least a “C” (2.00 on a 4.00 scale) cumulative grade point average.

By signing the consent form, you, as the parent/guardian, understand and agree:

- Course subject matter will not be altered because an under-aged student is registered for the course. Your child may be exposed to adult themes and diverse viewpoints.
- Parents or guardians may not attend a course in which their student is registered unless the parent or guardian is also registered for the same course. A student who registers for TRCC courses is fully responsible for complying with all policies and procedures of TRCC. This includes being aware of and adhering to the Policy on Student Conduct provided in the student handbook.
- Parents cannot expect instructors to discuss students’ attendance, grades or progress with them over the phone and/or in person without a witnessed Family Educational Rights and Privacy Act (FERPA) consent form on file from the student.
- Attendance is required, but not always monitored. Most likely, no one will call if the student misses class.

I have read and understand that parents of community college students do not have a right to access their children’s college records, even though the student is under the age of 18. Student’s college records will be released only with the witnessed FERPA consent of the student.

Parent Signature: _________________________________________ Date: _______________________
Print Name: _____________________________________________

Student Signature: ________________________________________ Date: _______________________
Print Name: _____________________________________________