



# Early College/VAST Application Supplement

All applicants to an early college program at Vermont State University must complete this supplement in addition to the application for undergraduate admission. A checklist of all required items appears on the student’s Application Status Page and can be found on at [www.vermontstate.edu](http://www.vermontstate.edu), in Admissions, How to Apply, Application Checklist.

**STUDENT INFORMATION**

I have applied to attend Early College/VAST beginning in Fall 20\_\_\_\_\_ (classes start in August)

Student last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle initial: \_\_\_\_\_

Permanent address City \_\_\_\_\_ State \_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_

*Biographic information is used to match supplement to your (the student’s) application for admission.*

**SCHOOL INFORMATION**

High school: \_\_\_\_\_

Location \_\_\_\_\_ Graduation year: \_\_\_\_\_

**PERMISSION TO SHARE**

I hereby grant permission to Vermont State University (VTSU) to share information related to my enrollment, attendance, and performance with my high school. I understand that official VTSU transcripts will be issued to my high school in January for fall term and May for spring term. This authorization will remain in effect while I am enrolled as an Early College/VAST student.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please designate the person at your school who should receive your transcript. This is often a high school counselor, registrar, counseling office administrative assistant, or home study coordinator.

Name: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Email: \_\_\_\_\_ Contact phone: \_\_\_\_\_

High School/Home Study Name: \_\_\_\_\_

High School/Home Study Mailing Address: \_\_\_\_\_



**COURSEWORK REQUIRED FOR HIGH SCHOOL COMPLETION**

This section is to be completed by the school counselor or administrator.

In the space below, please list all of the remaining courses and associated credits this student will need to complete during their early college program to graduate from high school/home study. Vermont State University student success advisors will determine VTSU course equivalents, for successful completion to fulfill outstanding graduation requirements.

Please indicate if your school expects one college course to equal one semester or one full year of high school study. If need be, please provide any additional information about what is required to fulfill each requirement. For example, if a Civics requirement must be a Political Science course, please make a note to that effect. If an Economics course would also suffice, let us know. One of the benefits of early college is for students to enroll in courses that may not be offered at their high school; Vermont State advisors will facilitate that type of exploration within the requirements you include. You are welcome to include a copy of the student's Personalized Learning Plan (PLP).

High School courses needed to graduate:	Credit:	Additional notes regarding courses (if needed):
1		
2		
3		
4		
5		
6		

**PERMISSION & AUTHORIZATION**

Students must have signed permission from their parent or legal guardian, high school principal and school/home study counselor in order to enroll in VTSU's Early College Program or VAST.

By signing below, I am granting permission for \_\_\_\_\_ to enroll in the VTSU Early College/VAST Program. I have reviewed and acknowledge the following:

- I have reviewed the High School courses needed to graduate and understand Vermont State University advisors will determine VTSU course equivalents, where successful completion will fulfill this student's outstanding graduation requirements.
- I acknowledge that the student's plan to attend Early College/VAST is written into their PLP.
- I have reviewed and acknowledge the student's permission to share.

**Principal signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Principal name (print clearly):** \_\_\_\_\_ **Contact phone:** \_\_\_\_\_

**School/home study counselor signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**School/home study counselor name (print clearly):** \_\_\_\_\_ **Contact phone:** \_\_\_\_\_

- I have reviewed and acknowledge the bullets above, as well as I understand that I am responsible for all costs associated with registering for classes at Vermont State University. I agree that if my account is not paid including interest, collection agency fees which may be based on a percentage of debt up to a maximum of 33.33%, attorney's fees, and other costs related to the collection of my account.
- Home Study students: I acknowledge the student's Home Study enrollment forms for the Early College/VAST school year are on file with, and approved by, the Vermont Home Study Office. Additionally, I acknowledge that the student has their intent to enroll in Early College/VAST described in a Minimum Course of Study.

**Parent/guardian signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/guardian name (print clearly):** \_\_\_\_\_ **Contact phone:** \_\_\_\_\_