

# OZARKS TECHNICAL COMMUNITY COLLEGE

## APPLICATION

### *Middle College*

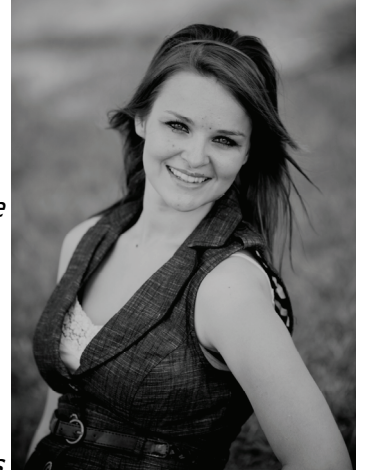
This program shows equality and fairness to the students who are hidden in a traditional high school setting. It has

opened me up to be the person I am today through medical college classes, a hospital internship, and a stimulating dynamic college environment. I am

motivated to seek opportunity so that I can be the change I wish to see in the world. — Tony



*Middle College is a place for people who are ready to move on from high school and experience life in a new perspective. Middle College has helped me by giving me more opportunity to expand my ability to learn. There are too many good things to list, but I think I enjoy the freedom given to us and how if we have a problem everyone is willing to help. I have a lot more one on one time with the instructors. —Emily*



## Want to Change YOUR High School Experience? OTC Middle College would like to help you reach your goals in our contemporary college environment.

**Q** What is Middle College?

**A** Middle College is a contemporary model of education in an alternative high school setting located on Ozarks Technical Community College campus. Through a unique partnership with Springfield Public Schools and area schools such as Republic, Rogersville, and Everton, we can offer an exciting, dynamic learning environment for juniors and seniors in high school.

**Q** Do I attend my home school as well?

**A** No, once you are selected, the Middle College located on OTC's campus becomes your new home school.

**Q** How could I benefit from Middle College?

**A** Middle College could give you the opportunity to:

- Earn a high school diploma.
- Start college early.
- Potential to earn scholarships.
- Train in technical education courses in early childhood, diesel/automotive technology, and medical services.
- Graduate with 20+ free hours of college credit.
- Gain valuable work and internship experiences with local employers.

**Q** How do I apply?

**A** Simply complete this application and return it to your high school counselor or mail it to the OTC Middle College, 1001 E. Chestnut Expressway, Springfield, MO 65802.

**This program is open to juniors and seniors in high school!**

**Want more information?**

Contact the Middle College Office at 417-447-6997 or email us at [middlecollege@otc.edu](mailto:middlecollege@otc.edu)

Check out our website at [www.otc.edu/middlecollege](http://www.otc.edu/middlecollege)

## Prospective Student Information

Date of Birth \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

( ) Male ( ) Female

SCHOOL COUNSELOR NAME

LAST NAME

FIRST

MIDDLE

SCHOOL NAME

CURRENT GRADE LEVEL

Address

Apt#

City

State

Zip

Home Phone

Student Cell Phone

Social Security Number (Required for Enrollment)

Are you presently enrolled and attending school? [ ] Yes [ ] No

**Mark an X by the program you would like to enroll in as part of the Middle College technical skills training.**

[ ] Diesel/Automotive Technology

[ ] Early Childhood Development

[ ] Medical Services

[ ] Networking/Computer Services

Do you have a child? [ ] Yes [ ] No

If yes, do you need daycare assistance? [ ] Yes

[ ] No

Do you currently qualify for the A+ program

[ ] Yes

[ ] No

**Check the ethnic code box that best applies to you:**

[ ] Non-Resident Alien

[ ] Black or African American

[ ] Hispanic

[ ] American Indian/Alaskan Native

[ ] White

[ ] Native Hawaiian/Pacific Islander

[ ] Asian

[ ] Other

## Student Essay

**Why are you applying to the Middle College program:**

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# Parent/Guardian

**Dear Parent or Guardian:** Your student is applying to MIDDLE COLLEGE. This is a highly selective program for three types of students: (1) students that are presently underperforming in the traditional high school setting (2) students with limited access to higher education (3) and students with a special life circumstance that could benefit from being in the college setting earlier. Your responses are very important to us.

*Please circle the correct answer below and provide a response, if needed.*

Has your student been suspended or expelled from school relating to weapons, alcohol, drugs, or willful infliction of injury to another person?

Yes

No

If yes, please explain?

Has your student been arrested or involved in a juvenile justice program or teen court?

Yes

No

If yes, please explain.

Does your student have an IEP or 504 plan?

Yes

No

If yes, in what area is his/her disability or condition?

Transportation to OTC for the Middle College program and local internships will not be provided. Will transportation be an issue for your student?

Yes

No

Parent involvement in the Middle College program is essential. We have required orientations and regular parent meetings throughout the two year program. Will you be able to commit to this type of partnership with the Middle College program?

Yes

No

DK

## NON-DISCRIMINATION

Ozarks Technical Community College prohibits discrimination and harassment and provides equal opportunities in its admissions, educational programs, activities, and employment regardless of race, color, religion, gender, national origin, age, marital status, sexual orientation, political affiliation, veteran status, and disabilities that include HIV and AIDS, and medical conditions. Bona fide occupational qualifications will be allowed in those instances where age, gender or physical requirements apply to the appropriate and efficient administration of the position. Any person having inquiries concerning OTC's compliance with these regulations may contact the following:

For employment inquiries:

Alice Ramey, Title IX & Section 504 Coordinator  
1001 E. Chestnut Expressway  
Springfield, MO 65802  
Ph. 417-447-2631

For student inquiries:

Julia Bunch, Title IX & Section 504 Coordinator  
1001 E. Chestnut Expressway  
Springfield, MO 65802  
Ph. 417-447-8188

Crime statistics and placement information are available in Student Services and at [www.otc.edu/students/offices/security/clearly.php](http://www.otc.edu/students/offices/security/clearly.php).

## RIGHTS OF PRIVACY (FERPA)

The Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, is a Federal law that states: (a) A written institutional policy must be established, and (b) A statement of adopted procedures covering the privacy rights of students be made available. The law provides that the institution will maintain the confidentiality of student education records. The OTC policy in response to FERPA is as follows: OTC accords all the rights under the law to students who are declared independent. No one outside the institution shall have access to, nor will the institution disclose any information from students' education records without the written consent of students except to personnel within the institution, to officials of other institutions in which students seek to enroll, to persons or organizations providing students financial aid, to accrediting agencies carrying out their accreditation function, to persons in compliance with a judicial order, and to persons in an emergency in order to protect the health or safety of students or other persons. All these exceptions are permitted under the Act. More information on FERPA can be obtained at <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

**Please place a check mark (✓) next to the statement which reflects your directives in regard to release of student education records. This authorization expires 120 days after completion of high school graduation or Middle College program.**

**I authorize** representatives of OTC to disclose my education records (including grades, behaviors, scheduling and attendance records) to my parent(s) or guardian(s). I understand by signing this authorization, I am waiving my rights of non-disclosure of these records under Federal law only as to the persons and entities specifically listed.

**I do NOT** authorize representatives of OTC to disclose my education records to my parent(s) or guardian(s).

I certify that the information given on this application is correct to the best of my knowledge. I understand that falsification of information may result in dismissal from Ozarks Technical Community College/Career Center.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name (PLEASE PRINT) \_\_\_\_\_

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

## STUDENT PERMISSION FORM FOR ASSESSMENT & SERVICES

Student Name \_\_\_\_\_ Birth date \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Current Grade \_\_\_\_\_

High School Currently Attending: \_\_\_\_\_

Special Education Disability or Medical Issues (if diagnosed) \_\_\_\_\_

Current GPA \_\_\_\_\_ Prescribed Medicines \_\_\_\_\_

\_\_\_\_\_ Male \_\_\_\_\_ Female A+ Program \_\_\_\_\_ Yes \_\_\_\_\_ No

I hereby give my permission for \_\_\_\_\_ to participate in  
(Name of Student- PLEASE PRINT)

assessment services provided by Ozarks Technical Community College, Career Center Counseling & Assessment, and Middle College staff. Assessment information can be released to Ozarks Technical Community College staff and/or my student's area high school for use in the selection process, career guidance, student development, scheduling, and program evaluation. This information may be released in written and/or verbal form. This release is valid for three years following the date that assessment services were completed.

I have attached specific medical information that could influence safety and test performance.

Parent/Guardian Name \_\_\_\_\_  
(Please Print)

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

For additional information about free assessment services, please contact :

**Career Center Counseling & Assessment Center**  
**Ph. 417-447-6983**

For additional information about the MIDDLE COLLEGE or the application process contact:

**Mrs. Amy Wood, MS**  
**Middle College Assistant Director/Counselor**  
**Ozarks Technical Community College**  
**1001 East Chestnut Expressway**  
**Springfield, MO 65802**

**Phone 447-6992**  
**wooda@otc.edu**

### For Counseling & Assessment Use Only:

Assigned to: \_\_\_\_\_ Date Received: \_\_\_\_\_

Date for assessment: \_\_\_\_\_

NOTES: