

CEO NEXT STEPS



- 1) Complete the entire CEO Admissions Packet. Once the packet is complete, and all signatures are obtained, submit the **completed and signed packet**, via scanned email to lori.smith-berry@bellevuecollege.edu or fax the documentation to 425-564-6137, or bring packet in its entirety to the main Bellevue College campus, building B, second floor B233 (directly above the bookstore). Place the completed packet in **The CEO Drop Box** located on the wall between offices B233A & B233B. If you have any problems locating drop box, please see Center for High School Programs front desk.
- 2) Once your packet has been reviewed for completeness, you will be contacted via the email you provided with your student ID number and instructions on how to contact our office to schedule your Entrance Interview and assessment placement testing. If your packet is incomplete, you will be contacted via email regarding the missing information. Your packet will **not** be processed if incomplete.
- 3) **Complete all forms**, and use the checklist below to assure you have all of them:

- ☐ **INCLUDE Copy of photo ID with date of birth**

Visit CEO Website www.bellevuecollege.edu/ceo to fill in and print out to add to complete packet:

- ☐ **CEO Bellevue College Application (Filled out at the CEO information session on-line)**
- ☐ **State Reporting Registration (Filled out on line, then print, sign and submit with completed packet)**

Included in packet handout:

- ☐ **Variance Attendance Release Form (school district in which you reside)**
- ☐ **Choice Transfer Request or documentation of official withdrawal from the last high school you attended (This form is only required if the last high school you attended is not in the school district you currently reside in)**
- ☐ **Official Transcript from the last high school or school district you attended**
- ☐ **Recommendation for Re-Engagement (school district official)**
- ☐ **FERPA Student Information Release Authorization Form**
- ☐ **CEO Drop/Add Consent Form**
- ☐ **CEO Student Contract**
- ☐ **Bellevue College Release of Information**
- ☐ **Photo Release**
- ☐ **King County Questionnaire**

- 4) You will take the **“CEO Variance Attendance Release Authorization”** form, that you received at the information session, to the school district that you reside in and have signed by the district official. You will go to the last high school attended to request an **“official Transcript, Choice Transfer Request or documentation of official withdrawal from the last high school you attended and a Recommendation for Re-Engagement Programming”**

Bellevue College does not discriminate on the basis of race, color, national origin, language, ethnicity, religion, veteran status, sex, sexual orientation, including gender identity or expression, disability, or age in its programs and activities. Please see policy 4150 at www.bellevuecollege.edu/policies/. The following people have been designated to handle inquiries regarding non-discrimination policies: Title IX Coordinator, 425-564-2641, Office C227, and EEOC/504 Compliance Officer, 425-564-2178, Office R130.



Career Education Options (CEO) Variance Attendance Release

OPEN DOORS [1418] YOUTH REENGAGEMENT SYSTEM APPLICATION
FOR ATTENDANCE IN A NON RESIDENT SCHOOL DISTRICT

PARENT/STUDENT REQUEST FOR TRANSFER IN ORDER TO PARTICIPATE IN REENGAGEMENT PROGRAMMING

TO BE COMPLETED BY PARENT/GUARDIAN/STUDENT

Student Information: Full Name: _____ Birthdate: _____

Address: _____ City: _____ Zip: _____

Phone: () _____ Parent/Guardian's Name: _____

Current or Last School Attended: _____ School in the _____ District.

Location of Last School: City: _____ State: _____

Last grade attended: _____ Last school year attended: _____

Reason for this transfer request: Enrollment in _____ Re-engagement Program/School in the _____ District.

Has the student been suspended or expelled from a previous school? ____ Yes ____ No

Is the student currently enrolled or has the student been previously enrolled in Special Education? ____ Yes ____ No

It is understood that we, as parents/guardians: 1) Will assume responsibility for adequate transportation and supervision to and from the requested school, 2) May be required to reapply in order for the above student to attend the requested school in future years, 3) Retain the right for the student to re-enroll in their resident district at any time, thus voiding this agreement.

Parent/Guardian Signature for student less than 18 years old

Student Signature for student 18 years old or older

Date

TO BE COMPLETED BY THE STUDENT'S RESIDENT DISTRICT—DISTRICT USE ONLY

The _____ District releases the above named student and waives attendance and state apportionment claims for the period beginning _____ and ending at the end of the school year in which the student turns 21 years of age.

Has student attended school in the District during the current school year? ____ Yes ____ No

If yes, what was the student's official withdrawal date: _____

Signature of District Designee: _____ **Date:** _____ Upon signature of this agreement by all parties, the District is released from financial responsibility for the student's educational costs, unless the student chooses to reenroll in the District, in which case this agreement is voided.

TO BE COMPLETED BY NON-RESIDENT DISTRICT ACCEPTING THE STUDENT—DISTRICT USE ONLY

After reviewing the above-named student's application, the space and capacity of the district, and the requested program's enrollment policies, the request for Inter-district Transfer for the period beginning _____ and ending at the end of the school year in which the student turns 21 years of age has been: Approved ☐ Denied ☐

Signature of District Designee _____ **Date:** _____

Transfer is approved with the understanding that the student retains the right to re-enroll in their resident district at any time, in which case this agreement is voided.
Bellevue College does not discriminate on the basis of race, color, national origin, language, ethnicity, religion, veteran status, sex, sexual orientation, including gender identity or expression, disability, or age in its programs and activities. Please see policy 4150 at www.bellevuecollege.edu/policies/. The following people have been designated to handle inquiries regarding non-discrimination policies: Title IX Coordinator, 425-564-2641, Office C227, and EEOC/504 Compliance Officer, 425-564-2178, Office R130.

RECOMMENDATION FOR REENGAGEMENT PROGRAMMING

The following student: _____ is requesting a recommendation in support of his/her application to enroll in an educational program in the Washington State Reengagement System.

Background:

The Open Doors [1418] Reengagement System is designed to provide educational services for students, ages 16 - 21, who are unlikely to earn a high school diploma before age 21. All reengagement programs provide instruction appropriate to each student's skills levels and goals, basic academic skills instruction, high-school equivalency certificate preparation, college and work readiness training and case management. Students receive high school credit for all academic work completed and are not required to take only the courses they need to complete in order to graduate. They can work toward other academic goals which may include: a high-school equivalency certificate, post-secondary degree, or industry recognized certificate.

Eligibility for reengagement programming usually depends on a student's credit deficiency ratio: the number of credits earned divided by the number of credits earned. The system is designed to serve students who have a low ratio, i.e. those who are significantly behind in credits needed for graduation.

However, there are some students who are not significantly behind in credits but have other barriers or life circumstances that make it unlikely that they will be successful in earning a diploma before age 21. WAC 392-700-035 created an alternative way for these students to be determined eligible. The law allows certain authorized professionals, familiar with the student, to provide information regarding other barriers or circumstances and to recommend that these students be enrolled in reengagement programming despite the fact that they are not significantly behind in credits.

Information Requested:

The student named above is not eligible for enrollment in a reengagement program based on credit deficiency. This student is requesting that you, as an authorized professional, provide information as to why you believe they are unlikely to obtain a high school diploma by age 21. Due to your history in working with this student, you are being asked to indicate if you:

1. Believe that it is unlikely that the student will earn a diploma in a traditional or alternative high school prior to age 21; and
2. Recommend enrollment in a reengagement program (which will require, the student's withdrawal from their traditional or alternative high school).

Student Authorization to Release Information:

I authorize: _____ from _____ to provide
Name of Person Making Recommendation Agency/Organization Name

information based on their professional history of working with me. Specifically, I authorize them to provide information related to academic or personal barriers that may prevent my graduation from high school prior to age 21 and to provide their recommendation regarding my application for reengagement programming.

Student name

Signature (if student is 18 years old or older)

Date

Parent/guardian name

Signature (if student is less than 18 years old)

Date



Student Information Release Authorization

Bellevue College does not release information contained in your educational record to family members, other people or agencies without your written consent. If you wish to give permission for another person or agency to have access to your records, please complete this form and submit it to the Enrollment Services Office. Use one form for each person or agency.

Student Name (print clearly)	Student ID Number
------------------------------	-------------------

I authorize Bellevue College to release the information indicated below to the following person/agency:

Name of Person or Agency			
Street Address	City	State	Zip code

I authorize Bellevue College to release the records indicated below for the purpose of (initial reason/s):

_____ Academic Assistance _____ Payment of Tuition _____ Enrollment Verification/Progress
_____ Other (specify reason): _____

I authorize Bellevue College to release the following information (initial each authorized area):

_____ Enrollment Services Records: Admission/Graduation applications, Class schedule, Transcripts, Residency
_____ Class Records and Progress: **ALL** classes or **SPECIFY** a class: _____
_____ Finance Records: Tuition & Fees charged/paid, Fines and other financial record holds on account
_____ Financial Aid File: Awards/Amounts Received, All submitted/required documents,
_____ Other (specify) _____

Bellevue College has the authority to release this information for the following time period:

_____ One time only (specify date) _____
_____ For _____ (specify dates/quarters)

Note: Educational records generally include submitted documents or information contained in our Student Record Database. Instructors are only required to release information regarding student progress in areas that go into making up the final grade for a course. They may choose, but are not required to have a detailed conversation with the authorized person or agency you indicate on this form.

My signature below authorizes this release.

Student Signature	Date
-------------------	------



Class ADD and/or DROP Consent Form

In the event that I stop attending classes without prior arrangement with the Career Education Options program at Bellevue College, and/or complete a course unsuccessfully, and/or program personnel cannot reach me after three or more attempts within ten calendar days, my status will be considered “left the program without notice.” I grant my permission to Career Education Options personnel to **ADD and/or DROP** classes from my schedule with the signature of the Career Education Options Program Specialist, or designee.

Furthermore, I understand that if I wish to withdraw this consent, it is my responsibility to submit a signed, written statement to the Career Education Options Program Manager, or designee. Reinstatement in the Career Education Options program is contingent upon signed permission from the CEO Program Specialist.

Date: _____

SID # _____

Student's Name (printed): _____

Student's Signature: _____

If participant is a minor (under 18):

Parent or legal guardian's signature: _____



Student Contract

- I understand that I must attend all classes regularly, I understand the CEO attendance policy and agree to adhere to the conditions of this policy presented at the information session
 - I understand that I must meet the mandatory 2 hour monthly Case Management meetings once I have completed all CEO classes
 - I agree to respect the right of the instructor to direct classroom activities
 - I commit to be an active and responsible learner
 - I will not disrupt the learning process with inappropriate classroom behavior
 - I agree to discuss any areas of disagreement with staff and other students in private outside of the classroom environment
 - I agree to respect the need for cooperation among the Bellevue College staff and students
 - I agree to comply with Bellevue College's Student Code of Conduct
- will respect and abide by the laws of the community, state, and nation;
 - will adhere to college rules and regulations which assure the orderly conduct of college affairs;
 - will maintain high standards of integrity and honesty;
 - will respect the rights, privileges, and property of other members of the college community; and
 - will not interfere with legitimate college affairs.

I _____ will abide by and agree to follow all of the above guidelines from the CEO Program or I may be suspended from the CEO Program and/or dismissed from Bellevue College.

Signature

date

Students may petition to reenter the CEO Program in a subsequent quarter.

Bellevue College does not discriminate on the basis of race, color, national origin, language, ethnicity, religion, veteran status, sex, sexual orientation, including gender identity or expression, disability, or age in its programs and activities. Please see policy 4150 at www.bellevuecollege.edu/policies/. The following people have been designated to handle inquiries regarding non-discrimination policies: Title IX Coordinator, 425-564-2641, Office C227, and EEOC/504 Compliance Officer, 425-564-2178, Office R130.

I, the undersigned, consent to each and every use by Bellevue College, and all of its officers, employees, and agents of 1) each photograph, videotape or other likeness of me taken/recorded on _____ (date) and/or 2) comments provided in interviews on _____ (date) and/or in writing. Such uses may include, but are not limited to, every use in a publication, newspaper, advertisement, web site, videotape presentation, television show or other publication or recording. I also waive any right to compensation for such uses, or to inspect or approve the uses beforehand. I release Bellevue College, its legal representatives and all persons acting under its permission or authority, from any liability for any blurring, distortion, alteration or optical illusion that may occur with these pictures.

Name	Phone (include area code)	Email	
Street Address	City	State WA	Zip code

Signature	Date
-----------	------

If the individual signing the above release is under age 18 (of if the individual is 18 or older and has a legal guardian), both the individual and the responsible parent or guardian must sign.

Signature of Parent of Guardian	Date
---------------------------------	------

To be completed by photographer

Location and/or Event	Subject Gender	Subject Hair Color
Clothing or other identifiable features of subject (glasses, shawl, baseball cap, etc.)		

Bellevue College does not discriminate on the basis of race, color, national origin, language, ethnicity, religion, veteran status, sex, sexual orientation, including gender identity or expression, disability, or age in its programs and activities. Please see policy 4150 at www.bellevuecollege.edu/policies/. The following people have been designated to handle inquiries regarding non-discrimination policies: Title IX Coordinator, 425-564-2641, Office C227, and EEOC/504 Compliance Officer, 425-564-2178, Office R130.

Routing Instructions

- 1) Public Information Director



CAREER EDUCATION OPTIONS
Release of Information

I agree to allow Career Education Options to contact authorized personnel such as instructors, social service's counselors, probation officers, parole officers, school district staff, and employers for the purpose of obtaining or exchanging pertinent information which will be used to help me qualify to enroll, or continue in the program.

I agree to allow the Career Education Options to obtain academic records regarding G.E.D. completion information from the Assessment Office at Bellevue College.

I understand that this information will be kept strictly confidential as defined by Bellevue College students' right to privacy guidelines; and that if I want to withdraw this release of information, it is my responsibility to so state in writing to the Career Education Options program manager.

Date: _____

Student's Name (Printed): _____

Student's Signature: _____

If participant is a minor (under 18):

Parent's or legal guardian's signature: _____



Information about King County Program for CEO students.

King County Employment & Education Resources can provide additional support while you are attending Bellevue College. The case manager works with you to reach any employment goals you have, including paid internships, job search and job readiness skills.

In addition to employment and education services, you would be able to get assistance with parking on campus, bus passes/ORCA card, GED classes, fees, summer class, obtaining certificates and permits.

The case manager can also assist with housing/homelessness issues, mental health, drug/alcohol and medical resources.

You will also be able to earn incentives dollars (\$10.00 - \$50.00) for completion of GED tests, High school and college diplomas, Job Readiness Portfolio, etc....

Please contact me if you have any questions.

Case Manager: **Vandana Raj Nand**

Call or text: 206-465-1656

Email: Vandana.nand@kingcounty.gov

(Assistance available with obtaining documents if needed.)

The eligibility required documents are:

- Photo ID; high school ID, State ID, passport or resident alien card.
- Social security card.
- US birth certificate, US passport, resident alien card or work authorization card.
- GED release form or school district withdrawal form.
- Males 18 years and over registered or willing to register for selective service as required by law.

Would you like to enroll or have the case manager contact you regarding this opportunity?

YES ☐ No ☐

Name
First Last

Birthdate / /

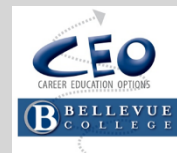
Phone # () -

Email

Today's date / /

Career Education Options (CEO)

State Reporting Registration
CEO contact CHSP@bellevuecollege.edu



Bellevue CEO Students are required to self-report the following information for state reporting purposes. The information you provide will be input into a database.

Directions: Please complete this form for state reporting. *If you do not fill out parts of this form, responses will be selected for you.*

NEW STUDENT INFORMATION

Legal Last Name

Legal First Name

Street Address

City and zip code

Mailing Address (if different than above)

City and zip code

Home Phone

Student Cell #

E-mail Address

CITIZENSHIP

City of Birth

State of Birth

Country of birth

U.S Citizen (please check)

Yes

No

If you are not a U.S. Citizen, please provide an estimated date you moved to the U.S. (Month, Day, Year - xx/xx/xxxx)

SCHOOL DISTRICT INFORMATION

What was the last school you attended?

Which School District do you live in?

Which School District signed your *Variance Attendance Form*?

STUDENT DEMOGRAPHICS

Date of Birth (Month, day year ex. xx/xx/xxxx)

Gender

Female

Male

Other (please specify)

Ethnicity (check all that apply):

Not Hispanic/Latino

Dominican

Cuban

Mexican/Mexican American/Chicano

Spaniard

Puerto Rican

Central American

South American

Latin American

Other Hispanic/Latino

Race

Black

American Indian or Alaska Native (specify tribe)

White

Asian (specify country)

Pacific Islander (specify country)

Student Lives With
(check all that apply)

Both Parents

Mother Only

Father Only

Father/Stepmother

Mother/Step father

Grandparents

Stepfather or Stepmother

Guardian

Agency

Self

Other

Military Family

U.S. Armed Forces active duty

National Guard Member

More than one member of armed forces/National Guard

No Affiliation

U.S. Armed Forces reserves

Data Not Available

No Response/Refused to state

Language you currently Speak

Language Spoken at home*

Native Language*

A response of language other than English () requires a WELPA Testing Date (please enter date month, day, year - ex: xx/xx/xxxx)

Homelessness	Shelters	Doubled-up	Unsheltered	Hotels/Motels	Not Homeless
--------------	----------	------------	-------------	---------------	--------------

Social Security Number (SSN)*

*Social Security Number Optional (see below)

I refuse to provide my SSN/ITIN (please Initial)

* Disclosure Statement: To comply with federal laws, we are required to ask for your Social Security Number (SSN), or Individual Taxpayer Identification Number (ITIN). If you do not provide this information, you may be subject to civil penalties of a \$50 fine in the event of an audit (refer to Internal Revenue Service Treasury Regulation 1.6050S-1 (e)(4) for more information). Refusing to provide this information does not affect your admission to the college.

What is the best way to contact you? Home Phone ☐ Cell Phone ☐ Email ☐

Emergency Contact Name _____

Relationship _____ Phone _____

How did you find out about CEO?

Have you graduated from high school? ☐ Yes ☐ No

Did you ever have an IEP or 504 plan? ☐ Yes ☐ No

Do you have a GED? ☐ Yes ☐ No

Have you ever been eligible for free or reduced lunch? ☐ Yes ☐ No

EMPLOYMENT INFORMATION

Current employer _____

Job title _____

Hours per week _____

Are you able to schedule your work shift around your school schedule? ☐ Yes ☐ No

PERSONAL BACKGROUND (your response will **not** affect entrance into the program)

Offender (any arrest) ☐ Yes ☐ No

If Yes, what for:

Are you currently on probation? ☐ Yes ☐ No

Do you have any upcoming court dates? ☐ Yes ☐ No Date? _____

Are you required to be in school through your probation? ☐ Yes ☐ No ☐ I don't know

Pregnant or Parenting youth ☐ Yes ☐ No

If pregnant, when are you or your partner due? _____

If you have a child, age? _____

Do you have arranged childcare? ☐ Yes ☐ No

Substance abuse Yes ☐ No ☐

Have you received treatment? ☐ Yes ☐ No When? _____

Are you currently in out-patient treatment? ☐ Yes ☐ No

If yes, what days and times do you attend? _____

Disability (learning, physical, or other) ☐ Yes ☐ No

If yes, are you interested in working with Disability Support Services? ☐ Yes ☐ No

PLANS FOR CEO

All CEO 1 classes meet Monday – Thursday. You are expected to attend class daily. Please choose a time that is convenient to your schedule and that you can commit to each day.

- ☐ Mornings (8:30 – 10:30 am)
- ☐ Mid-Morning (11:30 am – 1:30 pm)
- ☐ Afternoons (2:30 – 4:30 pm) (*Available fall quarter only*)
- ☐ Evenings (5:30 pm – 7:30 pm)

What are you planning on working on?

☐ Certificate (1 year full-time study) ☐ Degree (2 year full-time study)

What would you like to major in or focus on?

Why do you think CEO is a good fit for you?

Are there any reasons why you can't attend classes every day?

VERIFICATION OF INFORMATION

The information on this form is true and accurate as of this date. I understand that falsification of information to achieve enrollment or assignment may be cause for revocation of the student's enrollment.

Legal Parent/Guardian Name Printed

Signature (print and sign): _____ Date

Legal Student Name Printed

Signature (print and sign): _____ Date

Bellevue College does not discriminate on the basis of race, color, national origin, language, ethnicity, religion, veteran status, sex, sexual orientation, including gender identity or expression, disability, or age in its programs and activities. Please see policy 4150 at www.bellevuecollege.edu/policies/. The following people have been designated to handle inquiries regarding non-discrimination policies: Title IX Coordinator, 425-564-2641, Office C227, and EEOC/504 Compliance Officer, 425-564-2178, Office R130.