



MOWR PROGRAM POLICIES AND PROCEDURES

The following steps must be followed if you are planning to participate in the MOWR Program:

1. Attend a Parent/Student Information Meeting and participate in an Advisement Session with the school counselor & complete the Advisement/Contact Information Form.
2. Complete the College's Parent Permission Form. This form must accompany the student's college application and transcript.
3. Apply to and be accepted by the college/university of your choice. You are responsible for following the college's application procedures and meeting all deadlines.
4. After receiving your college acceptance, notify your high school counselor. It is your responsibility to know which courses you still need to complete for graduation. Set up an appointment with your counselor to review your credits if you are unsure.
5. Meet with your college advisor to set your college schedule.
6. Meet with your high school counselor to review your college schedule & high school credits/graduation requirements.
7. Complete Part I of the on-line MOWR (www.gafutures.org).
8. If you are taking a course that requires a Georgia Milestone Test/EOC, it is your responsibility to check with your high school test coordinator to find out the date, time and location of your test.
9. At the end of the semester, provide your high school counselor/registrar with an official copy of your college transcript.

NOTE: Steps 5-9 must be completed for each semester (fall, spring and summer). An official copy of your 2nd semester college schedule can be emailed to your high school MOWR coordinator instead of scheduling a face to face meeting, but you will need to sign the agreement again each semester.

MOWR STUDENTS ARE RESPONSIBLE FOR COMPLETING ALL HIGH SCHOOL GRADUATION REQUIREMENTS IN ORDER TO PARTICIPATE IN THE GRADUATION CEREMONY.

Office Use Only:

Student: _____ ID#: _____ College: _____

Processed Date:
Fall _____
Spring _____
Summer _____



BIBB COUNTY SCHOOL DISTRICT
 STRENGTH OF CHARACTER AND COLLEGE READY
BCSD MOWR PERMISSION FORM
Move On When Ready

Student's Name: _____ Student ID# _____

Student's Daytime Phone Number: _____ High School: _____

Seeking Admission to (Name of College/University) _____

MOWR Program [Select One] Full-time _____ Part-time _____

Parent's Name: _____ Parent's Daytime Phone Number: _____

MOWR funding covers tuition, mandatory fees and books. All other expenses will be the student and parents/guardians responsibility to pay.

My signature on this form indicates parental approval for my student to participate in the **MOWR** Program. I understand and agree to the following concepts regarding the **MOWR** Program:

- Upon completion of graduation requirements, the student has officially graduated, and may not continue taking **MOWR** courses or participating in any extra-curricular activities through BCSD.
- If the student fails to enroll in or pass the courses required for high school graduation, he/she will not be permitted to participate in the graduation ceremony or receive his/her diploma.
- The college will not communicate with the parent or high school if a problem arises. The college will only communicate with the student.
- **MOWR** credits may not transfer to another college. It is your responsibility to check with the college you plan to attend after graduation to see if they will accept the **MOWR** credits.
- **MOWR** students must continue to meet GHSA high school eligibility requirements to participate in competitive activities.
- **MOWR** students may transfer back to the high school only at the beginning of a semester.
- Students cannot reenter their home high school for course credit if they have missed fifteen (15) days of class instruction.
- **MOWR** students are required to take all required standardized testing and the student is responsible for making the testing arrangements with the high school testing coordinator
- **MOWR** students must comply with all rules from the post-secondary institution and the high school.
- Communication of post-secondary grades to the high school in a timely fashion is the student's responsibility.
- **MOWR** students are responsible for completing all necessary required paperwork.
- **MOWR** students are responsible for their own transportation to and from the college and will be away from the high school's campus during the times designated for college courses.
- **MOWR** students must complete the On-Line **MOWR** application located on www.gafutures.org and the **MOWR Student Participation Agreement** for each semester of participation. Failure to do so in a timely manner could result in the student being dropped from and/or receiving a bill their college classes.

Parent Signature _____ Date _____

Student Signature _____ Date _____

Counselor Signature _____ Date _____

Office Use Only:

Student: _____ ID#: _____ College: _____

Processed Date:
 Fall _____
 Spring _____
 Summer _____



Georgia Milestones

(End Of Course Assessment)

GEORGIA TEST REQUIREMENTS

Student's Name: _____ High School _____

College Courses Requiring Milestones

Year/Semester Taken

I understand the following information about MILESTONE requirements:

I must take the MILESTONE/EOC for the above course/courses at my high school in order to receive high school credit. The EOC will be taken at the end of the semester for which I am enrolled in the course

My score on the end of course assessment will count 20% of my high school course grade.

If I do not take the test or do not provide the college grade to my school counselor, I will receive a grade of "INC" and will not receive credit for the course. This will prevent me from graduating.

The MILESTONE/EOC assessment tests high school curriculum. College curriculum will vary from high school curriculum and students are held accountable for knowledge of the high school curriculum on the Milestone.

It is my responsibility to communicate with the high school testing coordinator to find out when/where/what time the MILESTONE will be given and to report on time for the test.

Student Signature: _____ Date _____

Counselor Signature: _____ Date _____

Local School Testing Coordinator's e-mail Address: _____

Office Use Only:

Student: _____ ID#: _____ College: _____

Processed Date:
Fall _____
Spring _____
Summer _____



ADVISEMENT / CONTACT INFORMATION MOWR PROGRAM

Student Information

Name: _____ Current Grade: _____

BCSD ID Number: _____ High School: _____ College: _____

Home Address: _____

Cell Phone Number: _____

Home Phone Number: _____

E-Mail Address: _____

Parent/Guardian Information

Parent(s) Name(s): _____

Home Phone Number: _____ Father _____ Mother

Work Phone Number: _____ Father _____ Mother

Cell Phone Number: _____ Father _____ Mother

E-Mail Address: _____ Father _____ Mother

Advisement Acknowledgement

I have participated in an advisement session regarding the MOWR Program at my student's high school. I understand the procedures and my responsibilities if I choose to participate in the program.

Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____

Office Use Only:

Student: _____ ID#: _____ College: _____

Processed Date:
Fall _____
Spring _____
Summer _____