

Bladen Early College High School 2025-2026 Application

School Counselor Recommendation - *REQUIRED*
due to Bladen Early College by February 28, 2025

*****Student initials indicate that they have waived the right to view this document. _____*****

Recommendation can be emailed to hscheshire@bladen.k12.nc.us

Applicant Name: _____

Student Number: _____

Traditional High School applicant would be assigned to for the 2025-26 school year:

East Bladen High School

West Bladen High School

Other

Is this student identified as AIG?

Yes

No

Does this student currently receive ML services?

Yes; Accommodations provided? _____

No

Is this student identified as EC?

Yes; what exceptionality? _____

current level of service _____

No

Does this student have a current 504 plan?

Yes; reason? _____

accommodations provided? _____

No

Is this student currently receiving mental health services?

Yes; provider? _____

No

Has this student had discipline referrals for this school year?

Yes; please explain. _____

No

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Is this student on the School Social Worker's case load?

Yes; please explain. _____

No

Please provide the number of absences for this student during this school year: _____

Please provide the number of absences during the 23-24 school year: _____

This student is currently enrolled in the following courses for high school credit:

Math 1

English 1

World History

Earth and Environmental Science

Please provide the EOG test levels for 7th grade for this applicant.

_____ Math _____ Reading

Based on the Early College Model, which of the following choices makes this candidate a good fit for Bladen Early College.

First generation graduate

At - risk for not graduating high school

Would benefit from an accelerated program of study

Please provide any additional information that you believe would be helpful in the consideration of this applicant.

*****Please include a printed transcript for this student.*****

Counselor Signature: _____