



Aviator Connections Admissions Application



Please print legibly. Application submission does not guarantee enrollment in the program.

Student Information						
Student Last Name		Student First Name		MI		Date
Street Address						
City, State, Zip						
Parent Name						
Parent Cell #		Student Cell #		Home Phone #		
Parent Email				Student Email		
Grade Level		Date of Birth		Credits Earned to Date		
Targeted Graduation						

Enrollment Information			
Is the student currently receiving services through our special education department?	yes <input type="checkbox"/>	no <input type="checkbox"/>	If yes, IEP or 504 Accommodations: <input type="checkbox"/> <input type="checkbox"/>

Aviator Connections Courses	
First Semester	Second Semester

Long Term Plan	<input type="checkbox"/> Credit Recovery Only	<input type="checkbox"/> Combination of Credit Recovery & Accrual
	Notes:	

Please explain why you would like to enroll in Aviator Connections (please be specific - continue on the back in necessary)	

Aviator Connections Program Fee	
_____ Part-Time (new or credit-recovery) \$50 per quarter	_____ Full-Time \$75 per semester

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

Parent Signature		Date	
------------------	--	------	--

Application Submission Options - Please return this completed application to:			
Contact Info:	Adam Betten, Director (937) 415 - 6354	Email:	adam.betten@vbcasd.com
Mail:	Butler High School	600 S. Dixie Drive, Vandalia, Ohio 45377	