

Grow Your Own WV Teaching Pathway Student Enrollment

County/High School: _____/_____ Academic Year: 2023-24 Date: _____

Student name [First, Middle Initial, Last] printed	
Student email address (School and Permanent)	1. 2.
Gender (M/F/No report)	
Student Mailing Address (include street, city, and zip code)	
Year of High school (9,10,11,12)	
Current GPA	
Ethnicity: Asian, Black, Hispanic, Multiple Ethnicity, Native American/Indian, White, No report	
First generation college student? Y/N	
Birthdate Month/Day/Year	
Endorsement/ licensure area of interest	

I understand:

- I must remain in good standing with my high school for the duration of the program
- My email address is the primary route of contact with the W.V. Dept. of Education
- I must maintain a minimum 2.5 GPA in all my dual credit college courses
- As a participant in the GYO WV program, I will receive:
 - No cost dual enrollment credits (24-30 college credit hours)
 - Early start on college and rich connections with Educator Preparation Programs
 - Paid membership in Educator’s Rising (if available)
 - Residency I and II paid (65% of starting teacher salary) as teacher of record **if** student has completed academic requirements **and** position is available

Student Signature

Date

Parent/Guardian Signature

Date

Superintendent Signature

Date