

**TRANSITION AND FIRST YEAR PROGRAM
CONSENT FORM
WEST VIRGINIA GEAR UP**

2021-2022
PROGRAM YEAR

FIRST NAME	MI	LAST NAME	STUDENT ID

CELL PHONE	HOME PHONE	INSTITUTION

By providing your cell phone number, you agree to receive text-based communication from the West Virginia Higher Education Policy Commission and the West Virginia Council for Community and Technical College Education, otherwise known as the College Foundation for West Virginia (CFWV). Your information will not be shared with institutions other than those to which you have indicated interest, nor will your information be shared with vendors or other third-party organizations. Standard text-messaging rates apply, and you are responsible for any costs incurred in receiving texts. You may also opt-out at any time by replying to any text sent.

MAILING ADDRESS	EMAIL

HIGH SCHOOL	HS GRADUATION DATE

ENROLLED IN OTHER FEDERAL PROGRAMS:

- Student Support Services
- Other TRIO Program

HOURS ENROLLED: FALL 2021: _____ SPRING 2022: _____

Full-time is 12 credit hours or more during fall or spring term and 6 credit hours during summer term. Part-time is any number of credit hours less than 12 for the fall or spring term or less than six for the summer term. Students are strongly encouraged to take 15 credit hours each semester and successfully complete their first year of college with 30 credit hours.

ACADEMIC MAJOR:	ANTICIPATED GRADUATION DATE: (MO/YR):

I authorize [Name of the Institution] _____ and their authorized representative(s) to release information to West Virginia GEAR UP program for evaluation and reporting purposes during the time I am enrolled at the institution. The type of information by the abovementioned institution to be released under this consent includes participation in GEAR UP sponsored or related campus and program activities and services. I also authorize the release of data from my secondary and postsecondary educational records to be used in the evaluation of the West Virginia GEAR UP program. I understand the information may be released electronically, orally or in the form of copies of written records. I understand that I may revoke this Consent upon providing written notice to the Transition and First Year Program Coordinator. I further understand that until this revocation is made, this consent shall remain in effect while enrolled at the institution and my educational records will continue to be provided to West Virginia GEAR UP for the specific purpose described above until such time that I am no longer enrolled at the institution.

Transition and First Year Program Staff Signature Date

Student Signature Date

