

**MONTPELIER HIGH SCHOOL
COMMUNITY BASED LEARNING PROGRAM
APPLICATION FORM**

Name _____ Date _____

Address _____ Telephone _____

_____ Email: _____

Parent/Guardian _____

Parent/Guardian work site and telephone _____

Teacher Advisor at MHS _____ Grade _____

What are your strengths and interests? _____

What ideas do you have for your CBL experience? _____

What do you hope to gain from your CBL experience? _____

What time do you have available for your CBL placement? (days and times/periods)

Can you provide your own transportation? YES _____ NO _____
(If you will be driving, you and your parent/guardian must complete the CBL
transportation agreement)