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Date Received  
(For Administrative Use Only)

# Willamette Academy

## Application Cover Sheet

*Application is due Wednesday, March 20<sup>th</sup>, 2019*



WILLAMETTE  
A C A D E M Y

Student Name: _____	Grade: ____
School: _____	Sex: __ Male __ Female
Salem-Keizer ID #: _____	
Counselor Name: _____	
Counselor Email: _____	@salkeiz.k12.or.us

### Application Checklist:

- Student Information Form
- Parent/Guardian Form
- Student Short Answer Questions
- 1 Recommendation Form
- Academic Information

### Attachments:

- Attachment A  
Last Semester Grade Transcript
- Attachment B  
Student Short Answer Responses
- Attachment C  
Teacher Recommendation Additional Responses

### Optional Items:

- State Test Scores
- Student Writing Sample





## Student Information Form

### Student Information:

Last Name		First	Middle	Ethnicity: <i>Check one</i> <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino  Race: <i>Check all that apply</i> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> African-American <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Other: _____
Street Address				
City		State	Zip Code	
Birthdate	Sex	Primary Language		
Salem-Keizer ID #	Cellphone Number	Email Address		

## Parent/Guardian Information Form

### Parent/Step Parent or Guardian Information:

Last Name		First	Middle
Street Address (if different from student)		Home Phone Number	Cellphone Number
City		State	Zip Code
Email Address		Primary Language	
Ethnicity: <i>Check one</i> <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino  Race: <i>Check all that apply</i> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> African-American <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Other: _____			
<b>Employment Information:</b>			
Occupation	Employer	Work Phone Number	
Please mark the last level of education that you have completed: <input type="checkbox"/> Elementary School <input type="checkbox"/> Associate Degree <input type="checkbox"/> Jr. High/Middle School <input type="checkbox"/> Bachelor Degree <input type="checkbox"/> High School <input type="checkbox"/> Graduate Degree			

### Parent/Step Parent or Guardian Information:

Last Name		First	Middle
Street Address (if different from student)		Home Phone Number	Cellphone Number
City		State	Zip Code
Email Address		Primary Language	
Ethnicity: <i>Check one</i> <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino  Race: <i>Check all that apply</i> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> African-American <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Other: _____			
<b>Employment Information:</b>			
Occupation	Employer	Work Phone Number	
Please mark the last level of education that you have completed: <input type="checkbox"/> Elementary School <input type="checkbox"/> Associate Degree <input type="checkbox"/> Jr. High/Middle School <input type="checkbox"/> Bachelor Degree <input type="checkbox"/> High School <input type="checkbox"/> Graduate Degree			



**Household Information:**

Please mark your **total annual** household income. **Count all sources of income in your calculation including child support and step parent/guardian income.** All information will be kept confidential.

- 0 to \$12,140
- \$12,141 to 16,460
- \$16,461 to 20,780
- \$20,781 to 25,100
- \$25,101 to 29,420
- \$29,421 to 33,740
- \$33,741 to 38,060
- \$38,061 to 42,380
- \$42,381 to 46,700
- \$46,701 to 51,020
- \$51,021 to 55,340
- Greater than \$55,341

How many people live in your household?	Does your child qualify for either federal program? <input type="checkbox"/> Free Lunch <input type="checkbox"/> Reduced Lunch <input type="checkbox"/> None
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What languages are spoken in your home?

What language do you prefer to receive Willamette Academy correspondence in?

Has your child immigrated to the United States within the last 10 years?

Are any members of your family current/former members of Willamette Academy? If yes, who? *Answering yes does not disqualify you.*

**Opportunity for Additional Information from Parents/Guardians:**

Is there any other information about your student that you would like Willamette Academy to consider?

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**Signature of Applicants:**

Before returning your application, please review the information that you have provided. By signing the application below, you are certifying the information in the application is complete, accurate, and truthful. Please sign your application before returning to your student's school.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Step Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Step Parent or Guardian Signature

\_\_\_\_\_  
Date

**Parent/Guardian Release:**

I hereby give permission for my student's middle school to release school records, including transcripts and academic test results. I understand that the information provided here will be used in considering my child for admission into the Willamette Academy program and that the teacher recommendation will remain confidential.

\_\_\_\_\_  
Parent/Step Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Name



## Student Information Form

### Student Information:

Last Name		First	Middle	Ethnicity: <i>Check one</i> <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino  Race: <i>Check all that apply</i> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> African-American <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Other: _____
Street Address				
City		State	Zip Code	
Birthdate	Sex	Primary Language		
Salem-Keizer ID #	Cellphone Number	Email Address		

### Formulario de información del padre/guardián

#### Información del Padre o Guardián:

Apellido		Primer Nombre		Segundo Nombre	
Domicilio (si es diferente a la del estudiante)			Teléfono de Casa		Número de Celular
Ciudad		Estado	Código Postal		
Correo Electrónico			Lenguaje Principal		
<b>Información de Empleo</b> Ocupación      Empleador      Numero de Trabajo					
Por favor marque el nivel de educación que usted ha completado: <input type="checkbox"/> Primaria <input type="checkbox"/> Carrera corta <input type="checkbox"/> Secundaria <input type="checkbox"/> Licenciatura <input type="checkbox"/> Preparatoria <input type="checkbox"/> Maestría					
Etnicidad: <i>Marque uno</i> <input type="checkbox"/> Hispano/Latino <input type="checkbox"/> No Hispano/Latino  Raza: <i>Marque todo lo que corresponda</i> <input type="checkbox"/> Indio americano o Nativo de Alaska <input type="checkbox"/> Afroamericano <input type="checkbox"/> Blanco/Caucásico <input type="checkbox"/> Nativo hawaiano o Pacífico indio <input type="checkbox"/> Asiático <input type="checkbox"/> Otro: _____					

#### Información del Padre o Guardián:

Apellido		Primer Nombre		Segundo Nombre	
Domicilio (si es diferente a la del estudiante)			Teléfono de Casa		Número de Celular
Ciudad		Estado	Código Postal		
Correo Electrónico			Lenguaje Principal		
<b>Información de Empleo</b> Ocupación      Empleador      Numero de Trabajo					
Por favor marque el nivel de educación que usted ha completado: <input type="checkbox"/> Primaria <input type="checkbox"/> Carrera corta <input type="checkbox"/> Secundaria <input type="checkbox"/> Licenciatura <input type="checkbox"/> Preparatoria <input type="checkbox"/> Maestría					
Etnicidad: <i>Marque uno</i> <input type="checkbox"/> Hispano/Latino <input type="checkbox"/> No Hispano/Latino  Raza: <i>Marque todo lo que corresponda</i> <input type="checkbox"/> Indio americano o Nativo de Alaska <input type="checkbox"/> Afroamericano <input type="checkbox"/> Blanco/Caucásico <input type="checkbox"/> Nativo hawaiano o Pacífico indio <input type="checkbox"/> Asiático <input type="checkbox"/> Otro: _____					



**Información Familiar:**

Marque por favor su ingreso anual. Incluyendo cualquier otra forma de ganancias, apoyo económico de niños y las ganancias de los padres/padrosos o de los guardianes. Toda la información se mantendrá confidencial.

- 0 to \$12,140
\$12,141 to 16,460
\$16,461 to 20,780
\$20,781 to 25,100
\$25,101 to 29,420
\$29,421 to 33,740
\$33,741 to 38,060
\$38,061 to 42,380
\$42,381 to 46,700
\$46,701 to 51,020
\$51,021 to 55,340
Mas grande que \$55,341

¿Cuántas personas viven en su casa? ¿Califica su hijo/a para cualquiera de estos dos programas de la escuela?
Almuerzo Gratis Almuerzo Precio Reducido Ninguna

¿Qué idiomas se hablan en su hogar?

¿En qué idioma prefiere usted recibir la correspondencia de la Academia de Willamette?

¿Su hijo ha emigrado a los Estados Unidos en los últimos 10 años?

¿Hay algún miembro de su familia que actualmente es miembro de la Academia de Willamette? ¿Si la respuesta es sí, quien es ese miembro? Responder sí no lo descalifica

**Oportunidad para información adicional de los padres:**

¿Hay otra información sobre su estudiante que usted quisiera que la Academia de Willamette considere?

Blank lines for additional information.

**Firmas del Solicitante:**

Antes de entregar su aplicación por favor revise la información que usted ha proporcionado. Al firmar esta aplicación, usted está certificando que la información está completa, es correcta, y cierta. Por favor firme la aplicación antes de regresarla a la escuela de su estudiante.

Firma del Estudiante

Fecha

Padre/Padraastro o Guardián

Fecha

Padre/Padraastro o Guardián

Fecha

**Permiso del Padre/Padraastro o Guardián:**

Doy permiso para la escuela de mi estudiante mande la información de esta forma referente a mi hijo/a al personal autorizado, incluyendo transcripciones y resultados de exámenes académicos. Entiendo que la información aquí que contiene esta forma será utilizada en la consideración de mi hijo/a para la admisión en el programa de la Academia de Willamette y que la recomendación del maestro permanecerá confidencial.

Padre/Padraastro o Guardián

Fecha

Nombre del Estudiante



Return to Selections Coordinator by \_\_\_\_\_

Student First & Last Name, SKID#

### Student Short Answer Questions

(To be completed by student)

Without the help of parents or teachers, please answer the following questions. When you are finished, attach this form with your family’s application and return the forms to your school.

**Please rate yourself in the following areas:**

	Strongly Disagree	Disagree	Agree	Strongly Agree
I do my very best work on assignments in school.				
I turn my work in on time.				
I work well in groups.				
I am a leader among my peers.				
I ask for help when I need it.				
I am a creative thinker.				
I plan to go to college.				
I like school.				

1. What is your favorite subject in school? Why?

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2. What is your least favorite subject in school? Why?

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3. Please list the extracurricular activities (clubs, sports, or music programs) you are involved in:

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**Short Answer:** Please answer the following questions on a separate piece of paper labeled “Attachment B, (your last name, first name).” Each answer needs to be a well-developed paragraph that is an example of your best writing.

1. What qualities do you have that make you a good candidate for Willamette Academy?
2. Who has been the biggest influence on your life so far? Explain. This can be anyone, someone you know or don’t know, living or dead. We want to understand how this person has had an impact on your life.



**Academic Information**  
(To be completed by counselor)

**Required Information:**

1. What is the students Cumulative GPA, or most recent semester if Cumulative GPA is unavailable?
  
2. English Language Arts/Literacy (as determined by Smarter Balanced test, or other measure)
  - Standard Exceeded – 4
  - Standard Met – 3
  - Standard Nearly Met – 2
  - Standard Not Met – 1
3. Mathematics (as determined by Smarter Balanced test, or other measure)
  - Standard Exceeded – 4
  - Standard Met – 3
  - Standard Nearly Met – 2
  - Standard Not Met – 1
4. On average, how many days per semester is this student absent?
  - 0-2 days
  - 3-6 days
  - 7+ days
5. Is this student enrolled in ELL classes?
  - Yes
  - No
6. Is this student enrolled in AVID?
  - Yes
  - No

**Additional Required Information:**

- Last semester grade transcript (labeled Attachment A)

**Optional Items:**

- State Test Scores
- Student Writing Sample

**Opportunity for Additional Information from Counselor:**

Is there any other information about this student that you would like Willamette Academy to consider?

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Return to Selections Coordinator by \_\_\_\_\_

Student First & Last Name, SKID#

**2019 Recommendation for  
Student Admissions**  
(To be completed by teacher)

**Teacher Recommendation:**

Willamette Academy asks for your valuable input in determining whether our program will meet the educational needs of the above named student. Your comments will be used in admission decisions and in developing individualized academic support if the student is invited to join our program. Feel free to add additional comments as you see fit.

Your Name	Job Title	
School	Work Phone Number	Email Address
How long and in what capacity have you known the applicant?		
Signature	Date	

**Academic Abilities:**

As compared to peers, please evaluate this student on the following traits:

	Poor	Fair	Good	Excellent
Ability to express ideas in writing				
Ability to express ideas verbally				
Academic achievement in school				
Academic potential				
Leadership potential				
Responsibility (Completes all assignments, turns in work on time)				

**Scholastic Motivation:**

	Poor	Fair	Good	Excellent
Ability to work alone				
Attention span				
Curiosity				
Effort/Motivation				
Participation in class				
Self-confidence				

