



HIGH SCHOOL PREP PROGRAM APPLICATION

For students currently in 7th grade

APPLICATION CHECKLIST:

Applications can be mailed, faxed, or dropped off to the address below.

- Proof of Income* (Household income cannot exceed \$65,000).
*Income must be included for all parents/guardians financially responsible for student

Acceptable Documents:

W-2
1040 tax return form
paystubs (2 months)
any benefit statement i.e. Social Security, Unemployment, etc.

- Student's most recent report card
Progress reports will not be accepted; must be student's report card.

Admissions Timeline: November-April

Applications will be reviewed from November-April. Decisions will be made by April 30th.

Program Overview

High School Prep is a nationally recognized 14-month program that begins the summer after 7th grade, continues two nights a week and every Saturday during the 8th grade year, and concludes with a final summer session after the 8th grade. Students take rigorous subject matter in math, English language arts, social studies, science, and technology in preparation for entrance into college preparatory high schools.

High School Prep students are bright, motivated, and determined:
It's All in the Prep!

Timeframe: 14 months

Location: University at Buffalo South Campus, 18 Acheson Annex

Semester 1 (summer after 7th grade) - 6 weeks, July-August

Semester 2 (8th grade year) - Tuesdays and Thursdays after-school and Saturdays

Semester 3 (summer after 8th grade) - 6 weeks, July-August



Buffalo Prep

High School Prep Program Application For students currently in 7th grade

University at Buffalo - 18 Acheson Annex - Buffalo, New York 14214
(P) 716.829.3605 (F) 716.829.2735

Student's Full Name: _____
First Middle Last

Home Address: _____
Number and Street Apt#

City: _____ State: _____ Zip Code: _____

Contact Number: _____ Home Office Cell

Date of Birth: _____ Place of Birth: _____

Male Female

Check all that apply to applicant:

- Black
- Native American
- Hispanic
- Asian
- Other

If other, please list: _____

Gross Family Income: _____

Language Spoken in Home: _____

Student First Language: _____

Parent/Guardian First Language: _____

**Student Social Security #: _____

Current School: _____ Current Grade: _____

Name of Guidance Counselor: _____

Previous School(s) your child has attended and years

School	Grade	Date of Attendance

Did your child skip or repeat a grade?

- Yes
- No

If yes, please explain: _____

Does your child have an Individual Education Plan (IEP) and/or a 504 plan?

- Yes
- No

If yes, please explain: _____

Additional Household Information

Please list all school-age children in your household.

Name	Grade	School

**** Buffalo Prep collects students' social security information for data reporting. This information will be used solely for Buffalo Prep's purposes and not shared with any outside parties.**

How did you hear about us? _____

Have you or your child participated in a Buffalo Prep program? Yes No If yes, please specify: _____

Student's parents are (check all that apply):

Married Separated Divorced Never Married Mother Deceased Father Deceased

Student Lives with:

Father Mother Guardian Father & Stepparent Mother & Stepparent

Single Parent Household Yes No

Parent/Guardian Name 1: _____

Male Female

Relationship to student:

Father Mother Guardian Stepparent Other: _____

Place of Birth: _____

Home Address: _____
(If different from student's) Number and Street Apt#

City: _____ State: _____ Zip Code: _____

Contact Number: _____ Home Office Cell

Contact Number: _____ Home Office Cell

Contact Number: _____ Home Office Cell

Email: _____

Current Employer: _____ Occupation: _____

Employer Phone No. _____

Highest Level of Education: _____

Parent/Guardian Name 2: _____

Male Female

Relationship to student:

Father Mother Guardian Stepparent Other: _____

Place of Birth: _____

Home Address: _____
(If different from student's) Number and Street Apt#

City: _____ State: _____ Zip Code: _____

Contact Number: _____ Home Office Cell

Contact Number: _____ Home Office Cell

Contact Number: _____ Home Office Cell

Email: _____

Current Employer: _____ Occupation: _____

Highest Level of Education: _____



Buffalo Prep

High School Prep Program Application Testing Consent

Testing Consent:

I hereby give permission for BUFFALO PREP to administer tests of academic ability and achievement, including group-administered tests and an individually administered intelligence test, as well paper-and-pencil questionnaires and short essays concerned with attitude to my child,

(Students Full Name) _____
First Middle Last

as part of the selection procedure for admission to BUFFALO PREP. I understand the result of tests will be used for no purpose other than the selection of BUFFALO PREP participants and, possibly, as supporting material for subsequent preparatory school applicants. I understand the results of these tests will be proprietary for Buffalo Prep's use only.

I also give my consent for BUFFALO PREP to request letters of recommendation from my child's present Math and English teachers and/or a response to a questionnaire concerning my child's study skills, motivation attendance and personality traits that may be relevant to a decision concerning my child's probable success at BUFFALO PREP. I also give my consent for such information to be requested orally from the teacher(s) should time not permit written materials being sought. I likewise give my consent for my child's teacher(s) to supply the aforementioned information, either in writing, orally or both.

I hereby declare that the consent herein granted is entirely voluntary on my part.

Parent/Guardian: _____
Signature _____ **Date:** _____
Print

Transcript Request:

The Student named below is an applicant for admission to BUFFALO PREP. Copies of grades and scores on standardized tests are needed for evaluation.

University at Buffalo
18 Acheson Annex
Buffalo, New York 14214
Fax 716.829.2735

Dear Register:

I AUTHORIZE THE RELEASE OF TRANSCRIPTS TO BUFFALO PREP.

Student's Name: _____ **Grade:** _____
Print
Parent Name: _____ **Date:** _____
Print
Signature



High School Prep Program Application Activity Consent

University at Buffalo - 18 Acheson Annex - Buffalo, New York 14214

(P) 716.829.3605 (F) 716.829.2735

Offsite Activity Consent:

I give my child permission to participate in all BUFFALO PREP activities on and off site.

Parent Name: _____
Print

Signature

Date: _____

Media Consent:

I give Buffalo Prep permission to photograph and videotape my child for promotional purposes including print media, television, and internet.

Parent Name: _____
Print

Signature

Date: _____



Buffalo Prep

High School Prep Parent/Guardian Responses

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Please answer the below questions:

Your application will not be considered if these questions are not answered.

1) Buffalo Prep requires time, commitment, and dedication from its students and their families. Why do you and your student want to be a part of Buffalo Prep? How do you think this program could benefit your student?

2) What are your student's strengths (academic and non-academic)?