

# 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).	
Acceptable Documents:	
W-2	
1040 tax return form	
paystubs (2 months)  any benefit statement i.e. Social security, Unemployment, etc.	
any benefit statement i.e. social security, offeniployment, etc.	
Student's most recent report card submitted with application'	*
**Student's 2nd quarter report card must also be	
submitted when received	
**Student's final report card due on the program's	
start day	
Submit teacher recommendation forms to math and English	
teacher	

#### Admissions Timeline:

Applications will be reviewed on a rolling basis. Decisions will be made until the program is full. Enrollment fee due upon acceptance.

#### 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!

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



#### High School Prep Program Application Students entering 8th grade in Fall 2017

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

Student's Full Name:	Middle	Last	
Home Address:		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 Aslan  Native American  Hispanic  Current School:  Name of Guidance Counselor:	Gross Family Income:  Language Spoken in Home:  Student Social Security #:  Current Grade:		
<del></del>	School(s) your child has attended and year		
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,  Yes No If yes, please explain:  Additional Household Information			
Did your child skip or repeat a grade?  Yes No If yes, please explain:  Does your child have an Individual Education Plan (IEP) and,  Yes No If yes, please explain:  Additional Household Information	∕or a 504 plan?		
Did your child skip or repeat a grade?  Yes No If yes, please explain:  Does your child have an Individual Education Plan (IEP) and Yes No If yes, please explain:  Additional Household Information	/or a 504 plan? st all school-age children in your household		

How did you hear about us?	
Have you or your child participated in a Buffalo Prep program	n? 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:	Stangarout Cothor
Father Mother Guardian Place of Birth:	Stepparent Other:
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: Email:	Home Office Cell
Current Employer:	Occupation:
Highest Level of Education:	оссиранот.



(P) 716.829.3605 (F) 716.829.2735

### Testing Consent:

	FALO PREP to administer tests of academic ability and ence test, as well paper-and-pencil questionnaires an	d achievement, including group-administered tests and an ad short essays concerned with attitude to my child,
(Students Full Name)	First Middle	
	e for admission to BUFFALO PREP. I understand the r cipants and, possibly, as supporting material for subs	result of tests will be used for no purpose other than the sequent preparatory school applicants. I understand the results
to a questionnaire concerning my child's probable success at BUFFA	y child's study skills, motivation attendance and perso NLO PREP. I also give my consent for such informatio	my child's present Math and English teachers and/or a response onality traits that may be relevant to a decision concerning my on to be requested orally from the teacher(s) should time not her(s) to supply the aforementioned information, either in
I hereby declare that the consent	herein granted is entirely voluntary on my part.	
Parent/Guardian:		
	Signature	Date:
	Print	
Offsita Asthultu Canant	High School Prep Program Applicat	ion Activity Consent
Offsite Activity Consent		
I give my child permission to part	icipate in all BUFFALO PREP activities on and off site	2.
Parent Name:	Print	<u></u>
	Signature	Date:
Madia Capaant	signature	
Media Consent:	photograph and videotape my child for promotional	numpees in print media, television, and internet
rgive buildio Frep permission to	Shotograph and videotape my child for promotional	purposes in print media, television, and internet.
Parent Name:	Print	
	Signature	Date:
	- W	



# High School Prep Program Application Transcript Request

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

#### Transcript Request:

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

# **Buffalo Prep**

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

Dear Register:			
	I AUTHORIZE THE RELEASE OF TR	ANSCRIPTS TO BUFFALO PREP.	
Student's Name:	Print	Grade:	
Parent Name:	Print		
	Signature	Date:	



High School Prep Parent/Guardian Responses
University at Buffalo - 18 Acheson Annex - Buffalo, New York 14214
(P) 716.829.3605 (F) 716.829.2735

#### Please answer the following questions so your child may be considered for the program:

your child want to be a part of Buffalo Prep? How do you think this program could benefit your child?
2) What are your child's strengths (academic and non-academic)?