# Amesbury Innovation High School

Application for Admission

2016-2017

*Students should meet the following requirements to be considered a viable candidate for the program at the Amesbury Innovation High School.*

**Admission Process:** The admission process will include a review of the information included in the student application materials and the student and parent/guardian interview. The process is meant to determine if:

* The Amesbury Innovation High School will be a successful environment for the student to have a successful high school experience
* The student’s overall ability will contribute to the learning environment
* The Academy has the ability to meet the individual needs of the student

**Residence:** Eligible students must be residents of Amesbury, Massachusetts or be choiced into the Amesbury School District before submitting an application.

**Admissions Procedure:** The following application package and supporting documents can be submitted via fax, mail, or delivered to the following address:

**Amesbury Innovation High School**

**71 Friend Street**

**Amesbury, MA 01913**

**Fax – 978-388-8073**

**Email –** [**maguiree@amesburyma.gov**](mailto:maguiree@amesburyma.gov)

*The Amesbury Innovation High School does not discriminate in its education programs, activities, or employment practices on the basis of race, color, national origin, age, sex, sexual orientation, religion or handicap under the provisions of Title VI of the Civil Rights Amendment of 1972, and Section 504 of the Rehabilitation Act of 1973. Any person having inquiries concerning the school’s compliance with the regulations implementing these laws may contact an Executive Director.*

Amesbury Innovation High School

Student Application – 2016-2017

To be completed by student applicant & parent/guardian

**I. Student Information**

Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MI\_\_\_\_\_\_

Date of Birth \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_ Gender Male \_\_\_\_\_\_ Female\_\_\_\_\_\_

Town & State of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legal Residence – City/Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_ Zip\_\_\_\_\_\_

Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address (optional)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**II. Parent/Legal Guardian Information**

Father or Legal Guardian Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Legal Residence\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_\_

Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_\_

Home Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work/Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Legal Custody of Student Yes\_\_\_\_\_ No\_\_\_\_\_

Father or Legal Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_/\_\_\_/\_\_\_\_

Mother or Legal Guardian Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother Residence\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

Home Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work/Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Legal Custody of Student Yes\_\_\_\_ No\_\_\_\_\_

Mother or Legal Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_/\_\_\_/\_\_\_\_

**III. Current School Information**

School Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_\_

School Telephone Number ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Grade Level \_\_\_\_\_\_\_\_\_\_\_\_ Years at Present School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous School (If less than 1 year) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IV. Grades**

Please include the grades from the student’s current and most recent quarter:

**Subject Current Quarter (Approx.) Previous Quarter**

Science:

Math:

English:

Social Studies:

Other:

Other:

**V. Please Check:**

**.** Student currently has an active Individualized Education Plan (IEP) for which he/she receives accommodations? Yes\_\_\_\_\_ No\_\_\_\_\_

\***If yes, please enclose a copy of the active plan with this application.**

**.** Student currently has an active 504 Plan for which he/she received services? Yes\_\_ No\_\_\_

**\*If yes, please enclose a copy of the active plan with this application.**

**.** Does the student have any existing conditions which would affect his/her potential to function as a student at Amesbury Innovation High School? Yes\_\_\_\_\_ No\_\_\_\_\_

\***If so, please describe the condition(s) on the back of this page.**

**Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section IIA. STUDENT QUESTIONNAIRE**

**(To be completed by the student applicant)**

Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Strongly Somewhat Neutral Somewhat Strongly**

**Disagree Disagree Agree Agree**

1. I want to “take owner- 1 2 3 4 5

ship” of my learning

1. I want to demonstrate 1 2 3 4 5

what I learn & what I can

do in different ways

1. I want to go to school 1 2 3 4 5

beyond high school

1. I am interested in developing 1 2 3 4 5

an individualized learning plan

to place subjects in context

with my interests

1. I can motivate myself to 1 2 3 4 5

work hard

1. I want to contribute to a 1 2 3 4 5

positive learning community

1. When I struggle with school 1 2 3 4 5

work, I ask for help before I

get overwhelmed

1. I work best within a 1 2 3 4 5

traditional school schedule

1. I would be interested in a non- 1 2 3 4 5

traditional schedule with late

day and/or internship/career-

technical opportunities

**Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_**

**Section IIB: STUDENT QUESTIONNAIRE (Continued-to be completed by the student)**

Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Open Response: Please respond to each of the following questions**

**(Use a separate piece of paper if necessary).**

1. Describe a past learning experience that was powerful, interesting and/or successful for you. Describe why this experience made the impression that it did.

1. Describe an instance in which you had difficulty learning about a particular topic. Describe why this learning experience was difficult for you.
2. Please describe any struggles, including all disciplinary issues that you’ve encountered at your present or previous school. How or what have you learned from them?

**Section IIB: STUDENT QUESTIONNAIRE (Continued-to be completed by the student)**

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Shorter Open Response: Please respond to each of the following questions**

**(Use a separate piece of paper if necessary).**

1. What co-curricular interests do you have? (Sports,clubs,activities, etc..)
2. What factors might cause you to struggle in school?
3. What are your main interests outside of school?
4. What will you contribute to the Amesbury Innovation High School community?
5. What subject areas within school most interest you? Why?

**Your Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_**

**Section IIIA: PARENT QUESTIONNAIRE**

**(To be completed by the applicant’s parent/guardian)**

1. List/describe your child’s strengths as a student
2. Please describe the learning environment in which your child would be most successful.
3. What are the three most important qualities that a school should exhibit?
4. If your child has received a disciplinary consequence involving suspension (inside or outside school), please describe the circumstances of each incident and the disciplinary action taken.

**Section IIIB: PARENT QUESTIONNAIRE**

**(Continued- to be completed by applicant’s parent/guardian)**

**Please prioritize the following statements based upon your beliefs as a parent:**

**Strongly Somewhat Neutral Somewhat Strongly**

**Disagree Disagree Agree Agree**

1. My student will benefit 1 2 3 4 5

from a smaller learning

environment

1. My student will benefit by 1 2 3 4 5

having an adult advisor

1. My student will benefit if a 1 2 3 4 5

strong school-student-parent

partnership is created

1. I believe grades should be 1 2 3 4 5

based on learning products-not

quantity of work

1. My student needs the ability to 1 2 3 4 5

demonstrate learning in different

ways

1. My student works best within a 1 2 3 4 5

traditional school setting

1. My student would be interested 1 2 3 4 5

in a non-traditional schedule with

late day and/or internship and/or

career-technical opportunities

**Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_**

**Section IV: Other Adult QUESTIONNAIRE**

**(To be completed by a non-relative adult who knows the student well)**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Direct Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The student named above is a candidate for admission to the AIHS. We would appreciate your response to the following questions.

**Strongly Somewhat Neutral Somewhat Strongly**

**Disagree Disagree Agree Agree**

1. This student has demonstrated 1 2 3 4 5

the ability to work well with

peers

1. This student has demonstrated 1 2 3 4 5

the ability to work well with

adults

1. This student has demonstrated 1 2 3 4 5

self-advocacy

1. This student has shown his/her 1 2 3 4 5

potential to be a positive

contributor to school community

1. This student has shown his/her 1 2 3 4 5

potential to earn better grades

in a project based environment

versus a more traditional para-

digm of assessment

1. This student is more likely to be 1 2 3 4 5

successful in a learning environ-

ment which measures the

attainment of specific

competencies (content & skills)

versus one which uses traditional

grading methods

1. If given the opportunity, this 1 2 3 4 5

student can demonstrate evidence

of learning through methods that

have not been traditionally emphasized

1. This student should be considering 1 2 3 4 5

some form of post-secondary education

1. I have no apprehension about 1 2 3 4 5

recommending this student for

admission to Amesbury Academy

Innovation School

**On the back of this, or on a separate piece of paper, please describe the characteristics of this student which lead you to believe he/she will be successful at the Amesbury Innovation High School.**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_**

AMESBURY INNOVATION HIGH SCHOOL

71 FRIEND STREET

AMESBURY, MA 01913

DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TO:   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby authorize Amesbury Innovation High School to obtain records *from* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(list school).  This release also includes communication over the phone and in person.

        \_\_\_\_ Attendance, Discipline and Health Record

        \_\_\_\_ Transcript information (listing all subjects, final grades and credits)

        \_\_\_\_ Grades for all completed terms or semesters this year.

        \_\_\_\_ Marks for the latest unfinished quarter or semester.

        \_\_\_\_ Standardized test scores and MCAS Test Results

        \_\_\_\_ Copy of IEP or 504 Plan if applicable

        \_\_\_\_ Program of studies

Any information you can send us that would be helpful in assisting the application process would be greatly appreciated.

Thank you,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_             \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student/Parent Guardian Signature             Principal

SEND TO: Eryn K Maguire, Principal

AMESBURY INNOVATION HIGH SCHOOL

71 FRIEND STREET

AMESBURY, MA 01913

PHONE 978-388-8037

FAX 978-388-8073

**2016-2017**

**APPLICATION CHECKLIST**

**(For SCHOOL USE Only)**

(This sheet does not need to be included in the application materials)

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) Sections I, II, III Complete

( ) Section IV ( ) Included

( ) To be sent by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) Copy of current IEP or 504 Plan enclosed (if applicable)

( ) Records Release form signed and enclosed

Delivered to: Amesbury Innovation High School

71 Friend Street

Amesbury, MA. 01913

( ) By (date):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_ p.m.

( ) Student Shadow Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) Interview scheduled by AIHS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) Notification received

Please note: If it is determined by staff, student, and/or parent/guardian that AIHS is not a good fit for the student, a meeting will be scheduled after a designated trial period to determine most appropriate placement for the student.