RETURN COMPLETED APPLICATIONS TO POMONA HIGH SCHOOL



Advancement Via Individual Determination

A College Preparatory Program

Pomona High School

2009-2010 Application

Pomona High School is proud to offer AVID (Advancement Via Individual Determination), a program designed to prepare students to succeed in a college and honors and advanced placement college preparatory pathway for admission to a four-year college or university upon high school graduation.

AVID Goals

- Challenge, encourage, and build student skills through academic instruction while creating a supportive and rigorous college going environment.
- Prepare students to meet the A-G requirements for California State University and University of California admission.
- Give students necessary skills to thrive in a competitive university and academic setting.
- Successfully prepare students for CAHSEE, benchmarks and the CST
- Increase college knowledge and awareness among parents and students.
- HIGH EXPECTATIONS that all AVID students WILL qualify for college prep and honors or AP classes when enrolling in High School and will attend a FOUR-YEAR UNIVERSITY upon high school graduation.

AVID Students

- Have between a 2.5-3.5 grade point average or higher.
- Have average to moderately high-test scores.
- Are Basic and or Proficient on the Content Standards Tests.
- Have good classroom behavior and attendance.
- Complete all of their classwork and homework assignments.
- Have the potential and desire to work hard to attend a four-year university or college.
- Are committed to enrolling in AVID for their entire high school career.
- Will be placed in the most rigorous classes (advanced / honors).



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Student Application

<u>1st. Please return you</u>	on by printing neatly ir r application to Mrs. E ase contact Mrs. Charlo	va Morales-Va	rgas or Ms. Dia	na Rendón, A	VID Coordi	nators. I
Student Name:				Date: _	//	
School ID #	Home Address:					
Home Phone #:		E-mail Addre	ss:			_
Parent(s)/Guardian(s	s) Name(s):					_
List All Languages	Spoken at Home:					
Please circle or fill	in each appropriate ca	ategory:				
Gender: M	ale Female	Ethnicit	y:			_
Name of School Cur	rrently Attending:					_
Have you ever been	enrolled in AVID?	Yes	No	DATE	S	
Do you qualify for fr	ee and reduced lunch?	YES N	0			
Are you willing to pa	articipate in summer sch	nool for acceler	ation beginning	this summer?	Yes No	
Do you plan to attend	l a four-year college/un	iversity upon g	graduating from h	nigh school?	Yes No	
Student Signature:				Date	//	_
Parent Signature:				Date:	//	_
Please take this to y	our Counselor to circl	le or complete	the following se	ections:		
Math CST Score	Advanced Profi	cient Basic	Below Basic	Far Below	Basic	
ELA CST Score	Advanced Prof	ficient Basic	Below Basic	Far Below	Basic	
CELDT Levels (If ap	pplicable): Reading	Writing	Listening	g Overa	all	
Cumulative Middle S	School GPA:	Current 8th	Grade GPA:			
School Official's Na	me:	I	Position:			_
School Official's Sig	nature:		Da	ate:		_

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Parent(s)/Guardian(s) Name: _____

Please respond honestly to each of the following questions. Thank You.

1. What are your goals for your son or daughter in high school and after graduation?

2. What are your student's strengths?

3. What area(s) does your son or daughter need help in?

4. How do you help and encourage your son or daughter to be successful in school?

5. How can AVID benefit your child?

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Student Questionnaire

Please respond to the following questions honestly and in complete sentences:

1. What do you like most about schoo

2. What do you like **least** about school?

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

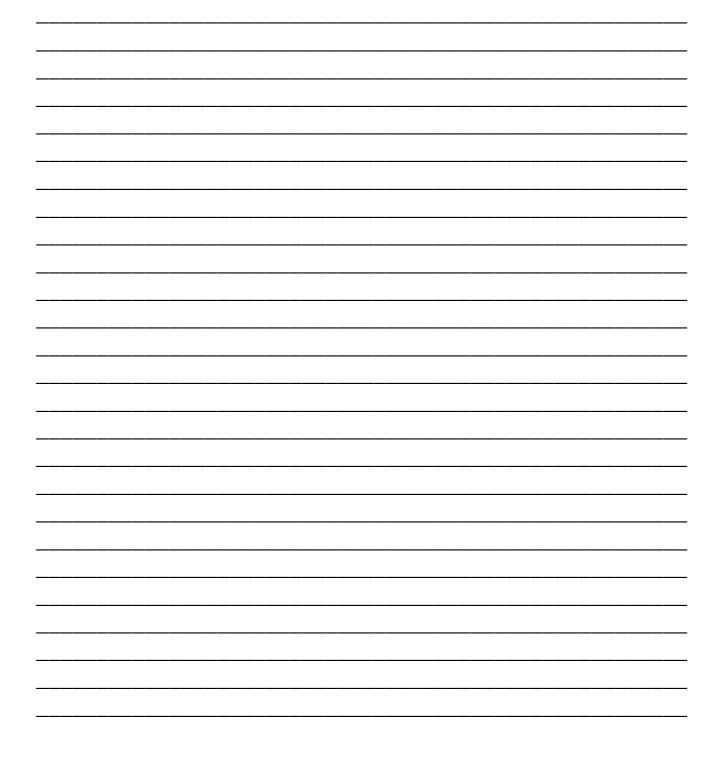
4. What is your least favorite subject in school? Why?

5. How much time do you spend studying at home?

6. How much time do you spend watching Television?

ESSAY: Why I want to be in AVID

In an essay of at least two paragraphs, explain why you would like to be in the AVID elective class. Make sure to include what you hope to get out of the program, what your strengths are, and what you think the AVID program can do for you.



Teacher Recommendation

Please complete the top portion of this form and then give the form to your teacher to complete. All recommendations should be placed in a sealed envelope and contain the recommending adult's signature across the envelope seal.

Student Name:	Student ID #:		
Current Middle School:	Please Return by: 1/20/10		
Name of Teacher/Adult:	Position:		

Thank you for taking the time to complete the AVID Recommendation Form. Please return this form in a sealed envelope to the student by the due date listed above so that a completed application can be submitted for review. If you have any questions or concerns please do not hesitate to contact Mrs. Eva Morales-Vargas or Ms. Diana Rendón, AVID Coordinators for Pomona High School at 909.397.4498 x400.

Please honestly rate the above listed student by circling: Outstanding, Satisfactory, or Unsatisfactory.

Classroom Behavior	Outstanding	Satisfactory	Unsatisfactory
Attendance	Outstanding	Satisfactory	Unsatisfactory
Work Habits	Outstanding	Satisfactory	Unsatisfactory
Study Skills	Outstanding	Satisfactory	Unsatisfactory
Organizational Skills	Outstanding	Satisfactory	Unsatisfactory
Positive Attitude	Outstanding	Satisfactory	Unsatisfactory
Class / Homework Completion	Outstanding	Satisfactory	Unsatisfactory
• Works Well in Groups	Outstanding	Satisfactory	Unsatisfactory
• Ability to Work Hard	Outstanding	Satisfactory	Unsatisfactory
Desire to Accomplish Goals	Outstanding	Satisfactory	Unsatisfactory
Comments:			

Signature: _____ Date: _____

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Comments:			

Signature: _____ Date: _____