



APPLICATION FOR 10TH GRADE ADMISSION

956 Woodlawn Academy Chatham, VA 24531 (434)432-8185

Principal: Deborah Powell

*PLEASE PRINT APPLICATION FOR SUBMISSION.



Applications are accepted from students during their **ninth-grade** year of school. A student may only apply once. To be considered for admission, applicants must complete the admissions process according to the procedures outlined in this document. The **new** STEM Academy is designed to offer ALL accepted 10th grade students authentic learning experiences and to open avenues for access to STEM opportunities. For The STEM Academy's inaugural year, rising 10th grade students will wave the two year commitment.

The STEM Academy is taking the lead with the Governor's STEM Initiative (see below) by removing boundaries and implementing interdisciplinary learning and problem-solving approaches to enable our students to maximize their potential. Students will be provided the opportunity to earn one science credit and the an elective in one of two areas – Health and Medical Sciences <u>OR</u> Advanced Career Connections.

THE STEM INITIATIVE

- Authentic learning experiences for ALL students.
- Interdisciplinary & applied approach: connecting all fields in complex relationships.
- Promoting problem solving through multiple approaches and perspectives.
- Emphasis on collaboration, innovation, and experimentation.
- Develop STEM-literate citizens prepared to face 21st century challenges.
- Driving the development of local prosperity through education of community-minded citizens that are critical and creative thinkers, excellent communicators, and collaborators.

APPLICATION INSTRUCTIONS

The application. Complete and submit the application page to your school counselor no later than March 1, 2022. **Recommendation A.** Fill out the top of Recommendation A and give it to a ninth grade teacher who agrees to give you a reference. That person is to submit Recommendation A to your school counselor by no later than March 1, 2022. **Recommendation B.** Fill out the top of Recommendation B and give it to a current school faculty member who knows your potential for success and agrees to give you a reference. That person is to submit Recommendation B to your school counselor by no later than March 1, 2022.

Counselor Form. Please have your school counselor fill out the Counselor Report Form by no later than March 1, 2022.

956 Woodlawn Academy Chatham, 24531 (434)432-8185

STEM FOR LIFE

promoting Lifelong Initiatives for Future Education

APPLICATION 2022 | The STEM Academy Application Form

Student Name:	 MI		
First	IVII	Last	Name You Are Called
Birth date:/		Gender:_	
High School You Attend:			·
Home Street Address:			
Mailing Address if P.O. Box:		· •,	
City:State:	Zip:	Mobi	le:
Parent/Guardian Contact(s):			
Name (First & Last):	· · · · · · · · · · · · · · · · · · ·	Day Phone:	
Relationship to Student:	Email:	.	,
Parent/Guardian 2 (Optional): Name (First & Last):		Day Phone:	
Relationship to Student:			•
For the following, please check "Yes" or "I I understand this program will take pl Chatham, VA. Transportation will be pattend this program for a half-day, on	ace at The STEM Acprovided from my ba	cademy in ase school. I will	Yes □ No □
 I understand I will be expected to con program completion requirements. 	nplete Project INO\	/8 to meet	Yes □ No □
 I understand that Project INOV8 will hands-on, research-oriented environ 		le of school in a	Yes □ No □
Recommendation Recipients:			
Rec A:		Rec B:	
I have requested the completion of the Cou	nselor Report Form	1.	Yes □ No □

A certify that I have read this application packet and adhere to the requirements to submit this application. I certify that all of my responses are correct and truthful to the best of my knowledge. I understand the program expectations and intend to completely adhere to all policies established by Pittsylvania County Schools and The STEM Academy. I understand the acceptance status will be mailed by March 21, 2022.

Signature of Applicant Date Signature of Parent/Guardian Da

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Recommendation Form A

Directions for Applicant and Parent/Guardian: Complete "Access" statement and sign. This form should then be presented to the student's first recommender. Applicant Full Name: _ School: APPLICANT'S and PARENT/GUARDIAN'S WAIVER OF RIGHT TO ACCESS CONFIDENTIAL INFORMATION _We voluntarily waive right of access to information contained on this recommendation form. _ We do not waive right of access. (No access is available before the completion of the evaluation process). **Applicant Signature** Date Date Parent/Guardian Signature Directions for Person Making Recommendation: This form is to be filled out by the above student's ninth grade teacher. Items left blank will be scored as zero. Return to the school counselor_no later than March 1, 2022. The STEM Academy is a comprehensive two-year (one semester each year), half-day pull-out program designed for students who have demonstrated the potential to be successful in a unique learning environment tailored to their individual needs. Students must be motivated and eager to participate in a innovative, hands-on learning environment. As you complete this recommendation, please consider the expectations of The STEM Academy and how this applicant matches these requirements. Use the following rating scale to assess this student's ability by circling the appropriate number next to each item below. 4-Outstanding Exhibits the behavior to an exceptional degree. 3-Above Average Exhibits the behavior more frequently than peers. Exhibits the behavior about the same as peers. 2-Average Rarely exhibits the behavior in comparison to peers. 1-Below Average **Learning Traits** Rating (circle one) 1. Learns quickly with good retention. 2. Is a keen and alert observer. 3. Has ability to analyze complicated material. 4. Demonstrates knowledge about a variety of issues. 5. Expresses ideas clearly. **Motivation** 6. Is self-initiating. 7. Is capable of working collaboratively. 1 2 8. Is capable of working independently. 9. Shows persistence when faced with challenges. 10. Chooses difficult and challenging tasks. 2 11. Sees tasks through to completion. 2 2 12. Strives to improve. 13. Is a self-directed learner. 1 2

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14. Demonstrates love for learning.

(Recommendation Form A)		Applicant Name_				
Work and Study Habita			4			
Work and Study Habits 15. Demonstrates organizational skills	5.		1	2	3	4
16. Uses time wisely.			1	2		4
17. Completes assignments on time.			1	2	3 3 3	4
18. Prepares for learning.			. 1	2	3	4
<u>Creativity/Risk Taking</u> 19. Exhibits curiosity.			1	2	2	4
20. Generates multiple or novel ideas.		•.	1 1	2 2 2	3 3	
21. Is a risk taker: adventurous and spe	culative.		1		3 3 3	4
22. Improvises when solving problems.			1	2	3	4
OVERALL RECOMMEN	IDATION	•				
(Required. Please circle one of the com						
(Required. Flease circle one of the com	ments below.)	•				
1. Do Not Recommend. 2. Reco	mmend with	3. Recommend			siastica	-
Res	ervations		F	Recom	nmend.	
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Please use the remaining space to writ	e out any additional	comments relevan	nt to this stu	dent's	s abiliti	es
pertaining to this application and prog	ram. Feel free to att	ach a document/le	etter if you n	eed m	nore sp	ace.
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Printed Name of Teacher	Signature of Teac	cher	Date	9	•	1
School:	Relationship to Stu	ıdent:				
•	ool counselor by Ma	_	*			

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Recommendation Form B

Directions for Applicant and Parent/Guardian: Complete "Access" statement and sign. This form should then be

presented to the student's second reco	ommender.					
Applicant Full Name:	Full Name: School:					
APPLICANT'S and PARENT/GUARDI	AN'S WAIVER OF RI	GHT TO ACCES	S CONFIDEN	TIAL INF	ORMAT	ION
We voluntarily waive right	· ·					on
We do not waive right of process).	access. (INO access is	avaliable belore	the completio		svaluatio	JII
" P. 5555)			•	, ,		,
Applicant Signature	 Date	Parent/	Guardian Signati	 ure [Date	
A CONTRACTOR OF THE CONTRACTOR		٥,	-			·
Directions for Person Making Recomm current faculty member. Items left bl March 1, 2022.						
for students who have demonstrated their individual needs. Students must be environment. As you complete this recand how this applicant matches these by circling the appropriate number ne	be motivated and eage commendation, please requirements. Use the xt to each item below Exhibits the beha	er to participate e consider the ex e following ratin	in a innovative pectations of g scale to asse	e, hands-c The STEM ss this stu	on learn 4 Acade	ing m <u>y</u>
3-Above Average	Exhibits the beha Exhibits the beha	\				
2-Average 1-Below Average	Rarely exhibits the		•		100	
<u>Learning Traits</u>	Trainerly extrinsities to	,		ing (circle	e one)	-
 Learns quickly with good retention Is a keen and alert observer. Has ability to analyze complicated Demonstrates knowledge about a Expresses ideas clearly. 	material.		1 1 1 1	2 3 2 3 2 3 2 3 2 3	3 4 3 4 3 4	.,
Motivation 6. Is self-initiating.	1 :_		,	1		•
7. Is capable of working collaborative	elv.		1	2 3	3 4 3 4	
8. Is capable of working independent	· · · · · · · · · · · · · · · · · · ·		1	2 3	3 4	
9. Shows persistence when faced wit	•		· . · 1 .	2 3	4 .	
10. Chooses difficult and challenging	tasks.	•	1	2 3		
11. Sees tasks through to completion			` - 1	2 3	3 4	•
12. Strives to improve.			· . 1	2 3	3 4	
13. Is a self-directed learner.			. 1	2 2	1	

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14. Demonstrates love for learning.

(Recommendation Form B)		Applicant Name			
		1			
Work and Study Habits	tamal alcilla	•	4 6		
15. Demonstrates organization	ional skills.		1 2	2 3	. 4
16. Uses time wisely.17. Completes assignments of	an tima		1 2	3	4
18. Prepares for learning.	in time.		1 2		4 4
Creativity/Risk Taking			. 1 2	. 3	4
19. Exhibits curiosity.	•		1 2	, 3	1
20. Generates multiple or no	vel ideas.	٠.	1 2		4
21. Is a risk taker: adventuro			1 2	3 3 3	4
22. Improvises when solving	problems.		1 2	2 3	4
		•			•
OVERALL RECO	<u>MMENDATION</u>				
(Required. Please circle one of	of the comments below.)			, .	
		,			
1. Do Not Recommend.	2. Recommend with	3. Recommend.	4. Enth	usiastica	illy
•	Reservations		Reco	ommend.	
			,		
Please use the remaining spa	ce to write out any addition	al comments relevant to t	his studen	t's abilitie	es
pertaining to this application	and program. Feel free to at	tach a document/letter i	f you need	more spa	ace.
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Printed Name of Teacher	Signature of Te	acher	Date	•	•
School:	Relationship to S	tudent:	•		
	urn to school counselor by N	4	.,		
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Counselor Report Form

Student Contact Informati	<u>on</u>	
Student Name:	<u> </u>	
Student Address:		
	,	· · · · · · · · · · · · · · · · · · ·
City:		Zip:
Ethnicity and Race		School Name:
Please answer both questi	ons.	
1. Hispanic? Yes ☐ No		School Counselor Name:
2. Race Code? (Use two-	digit codé)	School Counselor Email:
Standardized Test Record		
If available, please provide	and the second s	~ .
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Writing (GR8):	Science (GR8):	Please attach the following:
	Math 8:	1.Student Transcript
Reading (GR8):	Matil O.	2. Current Grades/Report Card
Earth Science:	Algebra I:	3. Discipline Record
	•	
Geometry:	Algebra II:	
10		
Counselor Recommendati		
Please answer the following	ng to the best of your ab	pility and attach your responses to this form. Your input is
essential in the selection p	rocess.	
1. Based on your person	al knowledge and inform	mation gathered during the application process what are thi
student's strengths an	d weaknesses as a pros	pective STEM Academy student? Does the student have the
potential to excel at Th	ne STEM Academy?	
2. To succeed at The STE	M Academy, a student	needs to attend regularly. How many unexcused absences
does this student have	this year to date? Is ab	senteeism a problem with this student? If so, are there
extenuating circumsta	nces?	
3. Does this student have	e a supportive home env	vironment? Please provide any other information pertinent
to this student's acade	emic success in this prog	gram.
Please indicate on the scal	e below how highly you	recommend this student for admission to The STEM
Academy. 1. Do Not	2. Recommend w	vith 3. Recommend 4. Highly Recommend
Pocommond	Danamustiana	(

School Counselor Signature: ___