



Your Potential. Our Mission.

2012-2013 ADMISSION APPLICATION

For a complete listing of Information Sessions visit
<http://www.themetroschool.org/news/metro-information-sessions.php>

Email completed application to: admissions@themetroschool.org

Student Contact Information

Student First Name

Middle Name

Last Name

Home Address

City

State

Zip Code

Mailing Address (If different from Home Address)

City

State

Zip Code

Student Phone Number

Student Email Address

(Format: 123-456-7890) Please provide the best number to reach you.

Student Demographics

Student Date of Birth

Gender

Ethnicity

Male

Female

(Format: MM/DD/YYYY)

Are you Latino/Hispanic?

Have you participated in any psychological or educational assessment by a professional?

Is English your first language?

Do you have any physical, emotional, health or education needs? If Yes, please explain.

Do you receive free or reduced lunch?

One or more of my parents has graduated from college.



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Technology Survey

Will you be participating in Metro's One-to-One Laptop Lease Program?

Do you have Internet access at home?

Home School Information

Current Grade Level

Current School

Current Middle, Junior High, or High School Attending

Home School District

County School District Where You Reside

Neighborhood High School

Assigned High School by Home Address



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Emergency Contact Information

Primary Contact (First, Last)

Relationship

Phone Number

(Format: 123-456-7890)

Secondary Contact (First, Last)

Relationship

Phone Number

(Format: 123-456-7890)

Student's Doctor

Phone Number

(Format: 123-456-7890)

Student's Dentist

Phone Number

(Format: 123-456-7890)

Medical Alerts

Does the Student take medication?

Yes

No

If yes, please list.

Does the Student have any known allergies?

Yes

No

If yes, please list.

Any medical history we need to be aware of?



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Parent Contact Information

Student Lives With

If Other, please list Relationship and enter information under Guardian One.

Guardian One (Mother)

First Name

Last Name

Employer

Daytime Phone Number

Cell Phone Number

Email Address

Guardian Two (Father)

First Name

Last Name

Employer

Daytime Phone Number

Cell Phone Number

Email Address



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Student Essay - To be completed by the Student!

In order for us to know a little more about you, please write a 3 paragraph essay explaining why you want to attend Metro Early College High School.



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Who are you? Tell us about you and your family.

What are some of your favorite things to do?

What do you enjoy most at school?

What extra-curricular activities interest you?

What do you enjoy least at school?

Describe something that you did that made you proud of yourself.

How would your classmates describe you?

Imagine it is four years from now and you have successfully completed the program at Metro Early College High School - what plans do you have for the future?