



Advancement Via Individual Determination (A.V.I.D.)

Rising 7th Grade Elective APPLICATION

for Kailua Intermediate School

Dear Families,

Kailua Intermediate is proud to be an AVID school. This program encourages all students to stretch their learning experience within the five categories of WICOR (Writing, Inquiry, Collaboration, Organization and Reading). At KIS, we believe that by increasing the rigor of each student, we will help to enable students to have more post-secondary choices and opportunities, including being college bound.

In addition, we offer the AVID Elective course. This class is designed to prepare students to meet the requirements for admission to four year colleges and universities by the end of high school. Students are taught study skills, note taking, time management, organization, reading, writing, collaboration, and research skills, while learning about college and career options for the future. AVID student scholars learn both in the classroom and outside while on field trips to colleges or universities or other cultural locations. The elective class also includes time for tutorial groups where students receive help with material from their academic classes from college tutors. The AVID Elective recruits student scholars who are motivated to do well and are willing to work hard to make their success a reality- now and in their future, even if their current academic record is not perfect. While in the program, students are expected to maintain a C or better in all courses.

If this sounds like the right class for your student, please encourage and support them in applying and interviewing for our program. If you have any questions about the program, please contact Ms. Shauna Hirota AVID co-coordinator by phone at 263-1500 or by email at shirota@kis.k12.hi.us. Potential AVID Candidates will be contacted for a formal interview upon receipt of a completed application. A wait list will begin once all the positions are filled.

Applications are due to Ms. Hirota at Kailua Intermediate by Feb. 16, 2018.



Kailua Intermediate School AVID Student Application

*Please print legibly or type
DUE: February 16, 2018*

For Office Use Only:
 ___ Fall 2018, Rising 7th
 ___ Essay
 ___ Teacher Ref #1
 ___ "Other" Ref #2
 ___ Interview: _____

1. Name: _____
Last
First
Middle Initial

2. Mailing Address: _____
No. and Street
City
Zip Code

3. Contact Info:
 Student: _____
Home Phone
Student Cell
Student Email

Mother/Guardian: _____
Name
Cell/Primary Phone
Email

Father/Guardian: _____
Name
Cell/Primary Phone
Email

4. Birthday: _____ Age: _____ Gender: M or F

<u>Mother/Guardian's</u>	<u>Father/Guardian's</u>
Highest Education Level: (Circle One) a) Did Not Graduate High School b) Graduated High School c) Completed Some College d) Graduated College e) Post Graduate Education (Master's, J.D., PhD)	Highest Education Level: (Circle One) a) Did Not Graduate High School b) Graduated High School c) Completed Some College d) Graduated College e) Post Graduate Education (Master's, J.D., PhD)
Ethnic Background (Circle all that apply) a) African American b) Hispanic/ Latino c) American Indian/ Alaska d) Native White/non-Hispanic e) Asian Multiracial f) Pacific Islander g) Filipino h) Other: _____	Ethnic Background (Circle all that apply) a) African American b) Hispanic/ Latino c) American Indian/ Alaska d) Native White/non-Hispanic e) Asian Multiracial f) Pacific Islander g) Filipino h) Other: _____

5. Free/Reduced Lunch Recipient? (Circle one) Yes or No

6. Family Demographic: (Circle all that apply)
Single Parent
Divorced Parents
Large Family (4+ children)

7. Primary Language Spoken at Home: _____

8. Current School: _____ Grade: _____

9. What is your current GPA? _____ Total # of absences this year: _____

10. Are you currently in the AVID program? Yes or No

11. Are you currently taking Honors/Advanced courses? Yes or No

12. Are you willing to take Honors/Advanced courses? Yes or No

13. Is the student currently receiving 504 or SPED IEP services? Yes _____ or No

14. List two teachers at your current school that know about your character and academic abilities and who will be completing your teacher recommendations:

Math Teacher Name: _____

L.A. Teacher Name: _____

Other Teacher Name: _____ Subject/Position _____

15. What kind(s) of activities do you currently participate in or plan to participate in during the school year?
(Ex: athletics, clubs, leadership)

16. Please attach a 150 word minimum essay (typed, double-spaced preferred, 12pt font will be about 1 page; handwritten also accepted) that addresses the following:

- Why do you want to go to college?
- How do you think AVID will help you reach your goals?

17. To the STUDENT: I understand that I am being considered for the AVID Program at Kailua Intermediate School and only upon acceptance will be officially enrolled in the College Prep Skills elective course for accepted AVID students. My acceptance is conditional upon several factors including, but not limited to, my commitment to challenge myself with honors and/or advanced courses.

Student Signature

Date

18. To the PARENT: I understand that my child is being considered for the AVID Program at Kailua Intermediate School and only upon acceptance will s/he be officially enrolled in the College Prep Skills elective course for accepted AVID students. His/her acceptance is conditional upon several factors including, but not limited to, a commitment to challenge his/herself with honors and/or advanced courses. I give permission for the release of school records (report card, state assessment scores and attendance) for the purpose of applying to the AVID program.

Parent/Guardian Signature

Date

TEACHER REFERENCE REPORT

Student Name _____
Last name First Name Middle Initial

TO THE PARENT/GUARDIAN:

Please complete the first line of the reverse side (Print or type, please). This report should be given to your child's current grade teacher. Please provide the teacher with a plain, stamped envelope (no return address) addressed to:

Kailua Intermediate School
Attn: Shauna Hirota
145 S. Kainalu Drive
Kailua, HI 96734

The teacher will mail the completed form directly to Kailua Intermediate and the information will be held in strict confidence.

TO THE TEACHER:

This student is an applicant for the Advancement Via Individual Determination (AVID) program at Kailua Intermediate School. The AVID Program is designed to target students with potential for greater success if given additional support. Through the instruction on study skills, college preparation and exploration given to students, it is our goal to help provide each student with the opportunity to not only go to, but thru college. All students are eligible to apply. Please note the success of a student is heavily dependent on their "individual determination". We regard your professional evaluation of this child as a part of the criteria used in considering their application.

Please complete the TEACHER REPORT on the other side. The parent/guardian is aware that any information you supply will be held in strict confidence.

Please return this form directly to Kailua Intermediate School by Feb. 16, 2018.

After the evaluation process, these references will be destroyed.

Thank you for your assistance.

Shauna Hirota
Kailua Intermediate School
AVID Elective teacher/Co-Coordinator

Student Name _____

Last

First

Middle

ACADEMIC QUALITIES

	Please circle the appropriate ratings. N/A (not applicable) may be used in areas where there is insufficient data.		
Motivation (effort, drive):	occasional	moderate	maximum
Ability to work alone:	needs help frequently	needs help occasionally	frequently works well
Home study habits:	never completes assignments	completes assignments	does more than expected
Participation in discussion:	contributes when called on	volunteers occasionally	joins in readily
Use of time:	occasionally well	usually well	often effectively
Follows directions:	needs much explanations	needs occasional help	responds quickly

PERSONAL QUALITIES

Classroom conduct:	occasional misconduct	usually good behavior	good conduct
Cooperates with adults:	sometimes	usually	nearly always
Personal/social adjustment:	relates poorly with others	fluctuating relationships with peers; generally happy person	healthy self image; healthy peer relations
Ability to work in a group:	sometimes able to cope	usually effective	frequently works well
Takes initiative:	sometimes	occasionally	frequently
Fulfills responsibilities:	sometimes	usually	nearly always

Observations which may help us to know this student are especially appreciated.

Teacher Signature _____ Print Name _____

School _____ Date _____

OTHER EDUCATOR/COACH REFERENCE REPORT

Student Name _____

Last name

First Name

Middle Initial

TO THE PARENT/GUARDIAN:

Please complete the first line of the reverse side (Print or type, please). This report should be given to a second adult educator or coach that is familiar with your child. Please provide the adult reference with a plain, stamped envelope (no return address) addressed to:

Kailua Intermediate School
Attn: Shauna Hirota
145 S. Kainalu Drive
Kailua, HI 96734

The adult will mail the completed form directly to Kailua Intermediate and the information will be held in strict confidence.

TO THE EDUCATOR/COACH:

This student is an applicant for the Advancement Via Individual Determination (AVID) program at Kailua Intermediate School. The AVID Program is designed to target students with potential for greater success if given additional support. Through the instruction on study skills, college preparation and exploration given to students, it is our goal to help provide each student with the opportunity to not only go to, but thru college. All students are eligible to apply. Please note the success of a student is heavily dependent on their "individual determination". We regard your professional evaluation of this child as a part of the criteria used in considering their application.

Please complete the REFERENCE REPORT on the other side. The parent/guardian is aware that any information you supply will be held in strict confidence.

Please return this form directly to Kailua Intermediate School by Feb. 16, 2018.

After the evaluation process, these references will be destroyed.

Thank you for your assistance.

Shauna Hirota
Kailua Intermediate School
AVID Elective teacher/Co-Coordinator

Student Name _____

Last

First

Middle

ACADEMIC QUALITIES

	Please circle the appropriate ratings. N/A (not applicable) may be used in areas where there is insufficient data.		
Motivation (effort, drive):	occasional	moderate	maximum
Ability to work alone:	needs help frequently	needs help occasionally	frequently works well
Home study habits:	never completes assignments	completes assignments	does more than expected
Participation in discussion:	contributes when called on	volunteers occasionally	joins in readily
Use of time:	occasionally well	usually well	often effectively
Follows directions:	needs much explanations	needs occasional help	responds quickly

PERSONAL QUALITIES

Classroom conduct:	occasional misconduct	usually good behavior	good conduct
Cooperates with adults:	sometimes	usually	nearly always
Personal/social adjustment:	relates poorly with others	fluctuating relationships with peers; generally happy person	healthy self image; healthy peer relations
Ability to work in a group:	sometimes able to cope	usually effective	frequently works well
Takes initiative:	sometimes	occasionally	frequently
Fulfills responsibilities:	sometimes	usually	nearly always

Observations which may help us to know this student are especially appreciated.

Educator/Coach Signature _____ Print Name _____

School/Organization _____ Date _____