North Salinas High School AVID Application



Pleas	e fill out all o	f the following section	ons.	
Student's Last Name		Student's First Name		Middle Initial
Parent/Guardian's Last Name		Parent/Guardian's First Name		Today's Date
				/ /
Home Phone Number	Parent/Guare	dian's Cell Phone#	Is your child currently enrolled in	
			AVID	?
			□ Yes	□ No
Parent/Guardian Email Address		Student Email Address		
Name of School Currently Attending	City of 0	Current School	Current Grad	le Level
Current Counselor Name			□ 8 th □ 9 th □ 10 th	□ 11 th □ 12 th
Father's/Guardian's Highest Level of Education		Mother's/Guardian's Highest Level of Education		
□ Some High School		□ Some High School		
□ Some college		□ Some college		
□ AA/AS Degree		□ AA/AS Degree		
□ BA/BS Degree		□ BA/BS Degree		
□ Master's Degree or Above		□ Master's Degree or Above		

Teacher Recommendations: *are useful for considering students for admission to the AVID program

1. Does this student seem to have college potential?	□ Never □ Some	times Always				
2. Does this student display good classroom work ha	□ Never □ Some	times Always				
3. Does this student practice good citizenship?		□ Never □ Some	times Always			
4. Does this student work collaboratively with other	students?	□ Never □ Some	times □ Always			
Additional Comments:						
			Γ			
Name of Teacher (Please Print)	Signature of Teac	cher	Date			
			/ /			
		N. C				
1. Does this student seem to have college potential?	1:40	□ Never □ Sometimes □ Always				
2. Does this student display good classroom work habits?		□ Never □ Sometimes □ Always				
3. Does this student practice good citizenship?		□ Never □ Sometimes □ Always □ Never □ Sometimes □ Always				
4. Does this student work collaboratively with other	students?	□ Never □ Some	times \square Always			
Additional Comments:						
Name of Teacher (Please Print)	Signature of Teacher Date		Date			
Traine of Teacher (Trease Time)	Signature of reac		/ /			
			, ,			
			<u> </u>			
If I qualify for AVID, I will do the following:						
Enroll in rigorous coursework						
Maintain a successful grade point average						
	and participation in all class	es				
 Maintain an organized AVID binder with a daily planner, assignments, and daily Cornell notes in all classes Complete all homework assignments and commit to at least two hours of homework every night 						
	mmit to at least two hours of	homowork avaru	night			
Complete an nonework assignments and con	mmit to at least two hours of	homework every	night			
I agree to accept enrollment into the AVID el	ective class, which will offer	academic suppor	t. I want to			
I agree to accept enrollment into the AVID el succeed, and I understand that I must take indivi	ective class, which will offer dual responsibility for my ow	academic suppor	t. I want to committing to			
I agree to accept enrollment into the AVID el succeed, and I understand that I must take indiviremaining in the AVID program for my high sch	ective class, which will offer dual responsibility for my ow lool career at North Salinas H	academic suppor on success. I am a ligh School, and t	t. I want to committing to hat I will be			
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Application Paragraph : Write a 50-100 word paragraph stating why the AVID Program is essential for your future goals and what you hope to gain by participating in it at North Salinas High School. Use your best spelling, grammar, and vocabulary. Please type and attach to this application or write neatly below.				
□ Enroll student in AVID class	□ Student does not qualify for AVID	□ Put on waiting list □ Interview		
Authorized Signature		Date / /		

Return Completed Application to North Salinas High School:

AVID Counselor, Ms. Emily Oliver or email completed applications to emily.oliver@salinasuhsd.org