

PACE High School
10th, 11th, & 12th Grade
Application for Admission
2016-2017

Date received at PACE _____

Name _____ Student ID _____ Date of birth _____ Age _____

Address _____ Home phone _____

City _____ Zip Code _____

Grade _____ Gender _____ Credits earned _____ Ethnicity _____ Soc. Sec. # _____

Live with parents? Yes ___ No ___ if no, explain _____

Father _____ Employer _____ Work phone # _____

Mother _____ Employer _____ Work phone # _____

Spouse/Guardian _____ Employer _____ Work phone # _____

Parent/Guardian e-mail address _____

Emergency contact _____

Emergency phone # _____

Are you single ___ married ___ children ___ if you have children, list their ages _____

Are you currently employed? Yes _____ No _____

If yes, where _____ for how long _____ hours worked weekly _____

Do you have any significant health problems? Yes _____ No _____

Do you take prescription medication? Yes _____ No _____ If so, please list the medication and why it is
prescribe: _____

Have you ever been in drug/alcohol rehabilitation? Yes _____ No _____ If so, please explain (optional):

Do you regularly see a counselor or psychiatrist? Yes _____ No _____ If so, please explain (optional):

Please provide a copy of your release form from your doctor or counselor

Are you currently enrolled in: Special Education classes Yes _____ No _____

Resource classes Yes _____ No _____

Have you been designated as a 504 student Yes _____ No _____

Have you ever repeated a grade Yes _____ No _____. If yes, what grade(s) _____

Have you passed the TAAS/TAKS/EOC test? Yes _____ No _____

As of today, how many credits do you need to graduate? _____

Have you been expelled or sent to a disciplinary alternative school? Yes _____ No _____

If yes, explain _____

How many days of school did you miss last year? _____

What circumstances have kept you from graduating from Duncanville High School? (Use back of sheet if necessary)

Why do you think PACE School will enable you to finish high school?

Student Signature

Date

Parent Signature

Date

After completing application, attach high school transcript, including test results, to the application and return the application to PACE High School. If you wish to mail the completed application, the mailing address is 502 E. Freeman, Duncanville, TX 75116.

Completing and returning this application to PACE does not constitute any guarantee of acceptance to PACE High School. Applications will be evaluated by the PACE counselor and principal. Only qualified applicants will be contacted by PACE in order to schedule an interview with the PACE principal. After the interview, students will be informed as to whether or not they will be accepted to PACE.

PACE High School
2016-17 Counselor's Assessment

Please note that incomplete counselor assessment forms will be returned to the sending counselor and may result in the student application to be denied consideration for PACE.

Student's name _____ ID# _____ Grade _____

Personal situation:

- ___ Disruptive home/family situation
- ___ Health problems that inhibit academic success Specify: _____
- ___ History of abuse in family
- ___ Nervous disorder Specify: _____
- ___ Rehabilitating drug/alcohol user
- ___ Teen parent/pregnant (please provide copy of doctor's statement confirming pregnancy and due date)
- ___ Other, i.e., conduct problems at school, non-attendance issues, English language use and proficiency at home Specify: _____

Academic

- ___ Slow learner Special Ed. Yes ___ No ___
- ___ Retained grade ___, ___, ___ Resource Classes ___ Content Mastery ___
- ___ Overage student (Grade ___, age ___) 504 Yes ___ No ___
- ___ Ability level in Math: ___ above average ___ average ___ below average
- ___ Ability in Reading: ___ above average ___ average ___ below average
- ___ Non-mastery TAKS/EOC Tests: Please place a \surd in the blank to indicate non-mastery.
 - 5th grade: Math ___ Reading ___ Writing ___
 - 7th grade: Math ___ Reading ___ Writing ___
 - 9th grade Math ___ Reading ___ Writing ___
 - 10th grade ELA ___ Math ___ Social Studies ___ Science ___
 - Exit Level ELA ___ Math ___ Social Studies ___ Science ___
- ___ Failure to graduate because of TAKS non-mastery
- ___ Fifth year senior
- ___ Dropout
- ___ Other: _____

Economic

- Employed – supporting spouse and/or children
- Employed – supporting handicapped or unemployed parent
- Employed – totally supporting self
- Other economic hardships _____

Overall Attitude/Behavior: Good Average Below Average

- Prefers limited social interaction
- Adjudicated
- Non-compliance with directives
- Low self-esteem
- Unmotivated
- Other: _____

Counselor’s Recommendation –Why do you feel this student is/is not a qualified candidate for PACE?

On a scale of 1 to 5 (1 = high; 5 = low), please rank this student’s urgency for placement at PACE.

1 2 3 4 5

To the best of my knowledge, this information is correct and factual.

Counselor’s signature

Date

Counselor’s Phone Number/Extension

*** Please attach student’s current attendance record, discipline report, test results, and transcript and forward to the PACE High School.**