Use this application when applying to:

- Andrews Aviation Academy
- Andrews Early College Academy of Health Sciences
- Dudley Early College Academies
  - Academy of Education
  - Academy of Health Sciences
  - Academy of Engineering
- Southern Guilford Academy
  - Academy of Education
  - Academy of Medical Science
  - Academy of Agriscience

Specific Considerations for High School Options applications:

The Andrews Early College academy of Health Sciences only accepts applications for rising 9th or 10th grade students.

The Dudley Early College Academies only accept applications for rising 9th grade students.

The Southern Guilford Academies only accept applications for rising 9th grade students.

Application Process:

- All applicants will submit a copy of the most recent report card from the current school year, a copy of the final report card from the previous school year, and a copy of all middle school EOG or EOC test scores.
- All applicants will submit two recommendations from current or recent Core content teachers (ELA, math, science or social studies).
- Applicants will respond to the short answer prompts on page 3 and 4 of the application.
- Applicants will submit the completed application coversheet and all required attachments directly to the high school(s) by February 16, 2018 at 4:00 pm. Teacher recommendations may be included in sealed envelopes or emailed to the school by the recommending teachers. If the student is applying to more than one high school option, a copy of the full application must be submitted to each high school by the application deadline.
- Once applications have been reviewed, students may be invited to complete an on-site personal interview.
HIGH SCHOOL OPTIONS APPLICATION  
Andrews, Dudley and Southern Academies  
2018-2019 SCHOOL YEAR

THIS SECTION TO BE COMPLETED BY PARENT/GUARDIAN. PLEASE PRINT IN INK.

Student’s Full Name ____________________________________________________________

If the student is currently enrolled in Guilford County Schools (GCS), enter the student’s GCS ID Number ____________________

Age _____ Date of Birth ___/___/____ Gender □ Male □ Female

Ethnicity (must select one) □ Hispanic/Latino □ Not Hispanic/Latino

Race (must select at least one) □ Black or African American □ Asian □ White

□ American Indian or Alaska Native □ Native Hawaiian or Other Pacific Islander

Name(s) of Parent/Legal Guardian ________________________________________________

Address of Parent/Legal Guardian (Street) ___________________________ (Apt. Number) ______

(City) ____________ (State) ____________ (Zip) ____________

Parent/Guardian e-mail address ________________________________________________

Parent/Guardian phone (home) ____________________________ (cell) ____________________ (business) ____________________

Attendance zone school (high school) ____________________________ School presently attending ____________________________

Current grade ____________________________ Expected grade level for 2018-19 ____________________________

Please indicate the High School Options program(s) that the student is pursuing. If the student would like to apply for more than one High School Option program, please indicate the order of preference with 1 (one) being the first choice.

Andrews Aviation Academy
Andrews Early College Academy of Health Sciences
The AP Capstone Academy at Western
Dudley Early College Academies (select one)
    Academy of Education
    Academy of Health Sciences
    Academy of Engineering
The Early College at Guilford
Greensboro College Middle College
Grimsley High IB Programme
High Point Central IB Programme
Smith High IB Programme
Page High IB Programme
Penn-Griffin School for the Arts

Southern Guilford Academy (select one)
    Academy of Education
    Academy of Medical Science
    Academy of Agriscience
The Academy at Smith
The Kearns Academy at Central
The Middle College at Bennett
The Middle College at GTCC Greensboro
The Middle College at GTCC High Point
The Middle College at GTCC Jamestown
The Middle College at N.C. A&T
The Middle College at UNCG
The STEM Early College at N.C. A&T
Weaver Academy for Performing and Visual Arts

PLEASE READ CAREFULLY: By submitting this application you understand the commitment of effort and time your child is undertaking if accepted into a High School Option program. Further, you will be required to request reassignment at the end of each year for as long as your child is enrolled in the program. If at the end of any high school year your child is unwilling or unable to continue studies in the High School Option program, she/he will be reassigned to the high school of her/his attendance zone. **Changing schools after initial entry into the 9th grade may affect athletic eligibility. It is recommended that you review Board Policy/Procedure (JI and JI-P) which include information about athletic eligibility requirements, and speak to the athletic director at your school to make sure you fully understand how changing schools may affect athletic eligibility.

Parent/Guardian Signature ____________________________ Date ____________________________

For office use only:  □ Student is recommended for ____________________________ Grade Level__________

□ Student has been placed in a waiting pool of candidates for ____________________________ Reason ____________________________

□ Student is not eligible for ____________________________. Reason ____________________________

Signature of Principal/Coordinator ____________________________ Date ____________________________

11-6-17

Page 2 of 8
1. What three words or phrases best describe you? Explain each of your responses.

2. What challenges have you faced in your academic and/or personal life? Describe the things you have done to overcome those challenges.
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<td>3.</td>
<td>What are your educational plans for after high school? What are your career goals?</td>
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<td>4.</td>
<td>What is one extra-curricular activity that is meaningful to you and why?</td>
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RECOMMENDATION FORM (1 OF 2)
(Must be received no later than February 16, 2018)
Recommendations from relatives (e.g., parents, legal guardians, uncles, god-parents, etc.) are not acceptable.

To the recommender: The student is applying for admission to a high school option school/program with Guilford County Schools. Please use this form to communicate information regarding academic performance and other characteristics that would affect the success of the student. Your comments are confidential and will not be shared with the student or parents/guardians. Please return this form to the student in a sealed envelope with your signature across the seal or mail to the program/school to be received no later than February 16, 2018. Form may also be scanned and emailed to the email address at the bottom of the form rather than sending a paper copy.

Student’s Full Name: ____________________________ Student’s Id #: ____________________________
(Last Name, First Name Middle Name)

Please check the High School Options program(s) that the student is pursuing.

_____ Andrews Aviation Academy
_____ Andrews Early College Academy of Health Sciences
_____ Dudley Early College Academies
_____ Southern Guilford Academy

Person Providing Student Reference: ____________________________ Position: ____________________________

Current School: ____________________________ Subject Taught (if applicable): ____________________________

Day Time Phone #: ____________________________ How long have you known the applicant?

Describe the applicant’s academic performance and intellectual curiosity:

How well does the applicant work without direct supervision? What is her/his capacity for independent work?

Describe the applicant’s level of involvement and success in class discussions and group projects:
How well does the student manage/organize his/her time to meet deadlines and accomplish specific academic goals?

Is there anything else you would like to share about the applicant that would be helpful in the admissions process?

In comparison to other students in the same grade, please rate the applicant on the following: (Leave blank if unable to evaluate.)

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Your program recommendation for the applicant would be:

- I recommend the applicant for an Academy.
- I recommend the applicant but have reservations. Explain here:
- I do not recommend the applicant for admission.

Additional comments:

Recommender’s Signature: ____________________________________________  Date: 

Recommender’s E-mail: ____________________________________________

Forms may be scanned and emailed to the following addresses:

- Andrews Aviation Academy: mayersd2@gcsnc.com
- Andrews Early College Academy of Health Sciences: jonese@gcsnc.com
- Dudley Early College Academies: paylord@gcsnc.com
- Southern Guilford Academy: winfrea@gcsnc.com
RECOMMENDATION FORM FOR HIGH SCHOOL OPTIONS APPLICATION
Andrews, Dudley and Southern Academies
2018-2019 SCHOOL YEAR

RECOMMENDATION FORM (2 OF 2)
(Must be received no later than February 16, 2018)
Recommendations from relatives (e.g., parents, legal guardians, uncles, god-parents, etc.) are not acceptable.

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