



APPLICATION DETAILS AND CHECKLIST

Mission

High Jump equalizes access to education for middle school students who have exhibited exceptional academic ambition and potential, but are of limited economic means. We provide academic enrichment, guidance, and support to students of diverse backgrounds, with the goals of sending our participants to superior college preparatory schools, ensuring their success while they are there, and enhancing their ability to gain admission to highly regarded four-year colleges and universities.

COMPLETING THE APPLICATION

- Applicants must currently be in the sixth grade.
- Students must exhibit consistent performance at or above grade level and generally average B+ or better.
- Completed applications, including transcripts, recommendations and financial aid materials, are due by **March 25, 2009**. Materials submitted after the deadline will not be considered.
- It is your responsibility to ensure that all application materials are sent to the High Jump office before the deadline.**
- Please use *black ink only* and make certain all information is accurate. Notify the office with any changes to contact information.
- Transcript Release Statement:** complete green shaded area and submit to the applicant's school office. DO NOT mail this form directly to our office. Transcript should include grades from at least two years prior.
- Report Card:** copies of 5th and 6th grade report cards must be included.
- Standardized Tests:** current ISAT, Terra Nova, ITBS and/or other standardized test scores must be included.
- Student Essay:** students must submit a **one-page handwritten** essay detailing 1) *How s/he heard about our program*, 2) *Why s/he wishes to attend the program*, and 3) *What s/he hopes to accomplish during her/his participation*.
- Recommendation Forms:** make sure the student's name is on each of the forms and submit them to each of the individuals who will supply the recommendation. At minimum, we require **one Math** and **one English** teacher recommendation, in addition to the **Counselor/Homeroom Teacher** recommendation. It is preferred that recommenders NOT complete more than one recommendation unless they can truly *detail* a student's performance across subject areas; if necessary, ask your 5th grade teacher, religion teacher or tutor to complete one of the forms. Recommenders should mail forms directly to High Jump, or give the completed form(s) in a signed, sealed envelope for student to mail with the application.

We highly suggest that recommenders save a copy of your recommendation in the event that application materials get separated or lost in the mail!

- Only qualified applicants will be contacted to schedule an interview beginning in April.

FINANCIAL INFORMATION

*Our status and mission as a non-profit organization serving students of limited family income requires that **we thoroughly collect financial information** from each applicant's family.*

- Parent Income Information, Dependents, and Personal Property* **must** match the current tax form. Any inconsistencies **must** include a *notarized written statement* detailing your financial situation
- Household Income Sources* **must** be provided with the expectation that our office can request supporting documents at any time. List your monthly gross (pre-tax) figures
- Include a copy of your 2007 **AND** 2008 Federal Income Tax Return (Form 1040) and send your 2007 W-2, and when available, your 2008 W-2. **Both are required for consideration**
- Information **must** be provided for each income-earning individual in or outside the household with financial responsibility to the applicant. **Violations will affect eligibility**
- Sign completed form

A pay stub is NOT acceptable as proof of income, nor is a State 1040. If you are submitting any other form as proof of income (e.g., S.S. benefits, unemployment, Medicaid), please submit an official notarized letter, copies of court documents, or transcript.

A complete application requires that ALL boxes have been checked. Applicants are responsible for ensuring that all application materials are sent to the High Jump office by the March 25, 2009 deadline.

APPLICATION FOR ADMISSION



FOR OFFICE USE ONLY

- Application
- Student Essay
- Report Card from current year (1st Quarter)
- Report Card from last year
- Standardized Test Scores
- Interview _____
- Counselor/Homeroom Teacher Recommendation
- English Teacher Recommendation
- Math Teacher Recommendation
- Proof of Income Document
- Financial Information Form

Applicant Information

Applicant's Name _____

Sex: Male Female

Date of Birth _____ Social Security # _____

Candidate is: African American Native American Asian Hispanic Caucasian Other _____

Email _____

Address _____ Apt. # _____

City _____ State _____ Zip _____

Neighborhood _____ Home Phone _____

Family Data

Please provide information for each Parent/Guardian, including stepparents.

Parent/Guardian 1 Name (First and Last)

Mrs. Ms. Mr. Dr.

Relationship to Applicant _____

Home Address (If different from applicant)

City _____

State _____ Zip _____

Home Phone _____

Work Phone _____

Cell Phone/Pager _____

Email _____

Highest level of education:

- Did not graduate high school
- High school diploma
- Two-year degree
- Master's degree
- GED
- Some college
- Four-year degree
- Ph.D.

Parent/Guardian 2 Name (First and Last)

Mrs. Ms. Mr. Dr.

Relationship to Applicant _____

Home Address (If different from applicant)

City _____

State _____ Zip _____

Home Phone _____

Work Phone _____

Cell Phone/Pager _____

Email _____

Highest level of education:

- Did not graduate high school
- High school diploma
- Two-year degree
- Master's degree
- GED
- Some college
- Four-year degree
- Ph.D.

Determined

Learners

Future

Leaders

Check if appropriate:

- Parents divorced Mother deceased Mother remarried - Stepparent's Name _____
- Parents separated Father deceased Father remarried - Stepparent's Name _____
- Parents married

If parents are divorced, who has legal custody? _____

If the applicant does not live with both parents in one household, describe the other parent's involvement with the applicant.

Please list the other children in the candidate's family:

Name	Age	School currently attending
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list the names of any relatives and/or friends who have attended or are currently attending High Jump:

Name	Relationship	Cohort
_____	_____	_____
_____	_____	_____
_____	_____	_____

Educational Information

Applicant's Current School _____ Current Grade Level _____

School Address _____

City _____ State _____ Zip _____

Neighborhood where school is located _____

The school is: Public Parochial Private Charter

Please list any summer programs or enrichment programs attended or currently attending:

School or Program _____

Address _____ Grades Attended _____

School or Program _____

Address _____ Grades Attended _____

Additional information you would like to provide at this time _____

Your signature below indicates that all information provided on this application is complete and factually correct. Your signature also attests to the fact that you wish for your child to be considered for participation in High Jump with no guarantee of final acceptance. It also authorizes High Jump to request a copy of the applicant's academic report with the most recent grades and standardized test scores.

Signature of parent or guardian _____ Date _____

High Jump stands behind the principle that there shall be no discrimination against any person in admission, employment, or otherwise because of race, color, religion, national origin, disability, gender, sexual orientation, or age.

COUNSELOR OR HOMEROOM TEACHER RECOMMENDATION



Applicant Name _____

To the applicant: Fill in your name above and give this form to your counselor or homeroom teacher, along with a stamped return envelope.

To the counselor, principal, or teacher: The student listed above has applied for admission to High Jump. We would appreciate any information you can provide that will help us make an informed decision regarding his or her application. Your comments will be strongly considered in our evaluation. Please take into consideration the following description of our program when evaluating this student's past, present, and potential performance.

High Jump is an academic enrichment program for selected seventh- and eighth-grade students with limited resources. High Jump helps prepare these talented students for entry into challenging college-preparatory high schools. The program consists of three seven-week summer sessions - before the seventh-, eighth-, and ninth-grade years - and Saturday sessions during the seventh- and eighth-grade school years. High Jump is a program in which students, faculty, and volunteers work closely together, and the ability to get along well with others is as important as academic motivation and ability.

Please mail your completed form to:
High Jump, 59 W. North Boulevard, Chicago, IL 60610-1492

General Information

Your Name _____

Position _____

Name of school _____

School Address _____

Phone _____ Fax _____ Email _____

How long have you known this applicant? _____

In what capacity? _____

Parental Involvement

Parents are an important part of our relationship with the student. Please share with us any thoughts you have regarding this family and their commitment to their child's development. _____

Determined

Learners

Future

Leaders

Student Evaluation

In comparison to other students of the same age you have known at your school, how would you rate the applicant in the following areas?

Evaluation Criteria	Below Average	Average	Very Good	Outstanding	One of my very best	No basis for judgement
Concern for others						
Respect for authority						
Maturity						
Leadership						
Integrity/Honesty						
Reaction to criticism						
Self-confidence						
Independence & Initiative						
Creativity						
Intellectual curiosity						
Critical thinking						
Study habits						
Oral expression						
Class participation						
Writing ability						
Ability to work in a group						
Seeks help when needed						
Overall academic achievement						
Overall personal qualities						

How will this student contribute to the High Jump community? Please detail any reservations you may have. _____

Signature _____ Date _____

Thank you for your time and for the helpful information you have provided.

ENGLISH TEACHER RECOMMENDATION



Applicant Name _____

To the applicant: Fill in your name above and give this form to your English teacher, along with a stamped returned envelope.

To the counselor, principal, or teacher: The student listed above has applied for admission to High Jump. We would appreciate any information you can provide that will help us make an informed decision regarding his or her application. Your comments will be strongly considered in our evaluation. Please take into consideration the following description of our program when evaluating this student's past, present, and potential performance.

High Jump is an academic enrichment program for selected seventh- and eighth-grade students with limited resources. High Jump helps prepare these talented students for entry into challenging college-preparatory high schools. The program consists of three seven-week summer sessions - before the seventh-, eighth-, and ninth-grade years - and Saturday sessions during the seventh- and eighth-grade school years. High Jump is a program in which students, faculty, and volunteers work closely together, and the ability to get along well with others is as important as academic motivation and ability.

Please mail your completed form to:
High Jump, 59 W. North Boulevard, Chicago, IL 60610-1492

General Information

Your Name _____

Position _____

Name of school _____

School Address _____

Phone _____ Fax _____ Email _____

How long have you known this applicant? _____

In what capacity? _____

Course Description

Title _____

Is this course sectioned according to ability?

Yes No If this course is sectioned, please briefly explain how this course is sectioned and the applicant's placement.

How often does/did this class meet? _____ For how long? _____

What text or related readings are used? _____

What is the applicant's grade average? _____

Determined

Learners

Future

Leaders

Student Evaluation

In comparison to other students of the same age you have known at your school, how would you rate the applicant in the following areas?

Evaluation Criteria	Below Average	Average	Very Good	Outstanding	One of my very best	No basis for judgement
Concern for others						
Respect for authority						
Maturity						
Leadership						
Integrity/Honesty						
Reaction to criticism						
Self-confidence						
Independence & Initiative						
Creativity						
Intellectual curiosity						
Critical thinking						
Study habits						
Oral expression						
Class participation						
Writing ability						
Verbal reasoning						
Ability to work in a group						
Seeks help when needed						
Overall academic achievement						
Overall personal qualities						

How will this student contribute to the High Jump community? Please detail any reservations you may have. _____

Signature _____ Date _____

Thank you for your time and for the helpful information you have provided.

MATH TEACHER RECOMMENDATION



Applicant Name _____

To the applicant: Fill in your name above and give this form to your math teacher, along with a stamped return envelope.

To the counselor, principal, or teacher: The student listed above has applied for admission to High Jump. We would appreciate any information you can provide that will help us make an informed decision regarding his or her application. Your comments will be strongly considered in our evaluation. Please take into consideration the following description of our program when evaluating this student's past, present, and potential performance.

High Jump is an academic enrichment program for selected seventh- and eighth-grade students with limited resources. High Jump helps prepare these talented students for entry into challenging college-preparatory high schools. The program consists of three seven-week summer sessions - before the seventh-, eighth-, and ninth-grade years - and Saturday sessions during the seventh- and eighth-grade school years. High Jump is a program in which students, faculty, and volunteers work closely together, and the ability to get along well with others is as important as academic motivation and ability.

Please mail your completed form to:
High Jump, 59 W. North Boulevard, Chicago, IL 60610-1492

General Information

Your Name _____

Position _____

Name of school _____

School Address _____

Phone _____ Fax _____ Email _____

How long have you known this applicant? _____

In what capacity? _____

Course Description

Title _____

Is this course sectioned according to ability?

Yes No If this course is sectioned, please briefly explain how this course is sectioned and the applicant's placement.

How often does/did this class meet? _____ For how long? _____

What text is/was used? _____

What is the applicant's grade average? _____

Determined

Learners

Future

Leaders

Personal Recommendation

In comparison to other students of the same age you have known at your school, how would you rate the applicant in the following areas?

Evaluation Criteria	Below Average	Average	Very Good	Outstanding	One of my very best	No basis for judgement
Concern for others						
Respect for authority						
Maturity						
Leadership						
Integrity/Honesty						
Reaction to criticism						
Self-confidence						
Independence & Initiative						
Creativity						
Intellectual curiosity						
Critical thinking						
Study habits						
Oral expression						
Class participation						
Writing ability						
Mathematical reasoning ability						
Ability to work in a group						
Seeks help when needed						
Overall academic achievement						
Overall personal qualities						

How will this student contribute to the High Jump community? Please detail any reservations you may have. _____

Signature _____ Date _____

Thank you for your time and for the helpful information you have provided.

TRANSCRIPT RELEASE STATEMENT



To the parent:

Please sign the release statement below and give this form to your child's school principal. To complete your child's application, it is necessary that we receive a copy of his or her school transcript attached to this form.

Applicant Name _____

Current school _____

School Address _____ School Phone _____

Principal/Counselor Name _____

Applicant Address _____ Apt. # _____

City _____ State _____ Zip _____

Home Phone _____

Date _____

Parent's Signature _____ Date _____

To the principal:

The student named above is a applicant for admission to High Jump. Please submit the following records as soon as possible but no later than the date below:

- Final grade report, fifth grade
- First quarter grade report, sixth grade
- Transcript
- Standardized test scores

Please return this form along with the records to:

High Jump
59 W. North Boulevard
Chicago, IL 60610-1492

Please return the requested records no later than the date below:

FINANCIAL ELIGIBILITY FORM



High Jump equalizes access to education for middle school students who have exhibited exceptional academic ambition and potential, but are of limited economic means. FULL completion of this form is required for consideration. **Financial Aid forms with incomplete or blank fields will NOT be reviewed for admission.**

CONFIDENTIALITY STATEMENT: Financial information is reviewed by authorized High Jump staff only, and is not shared, distributed or released to outside parties. Review of financial information is strictly to determine a student's need and eligibility for enrichment programming/high school preparation, relevant to the applicant pool. Eligibility is determined on a case-by-case basis, and decisions are not made until all qualified applications have been reviewed.

Applicant Name

Parent/Guardian 1 Income Information

Parent/Guardian Name _____

Occupation _____ Annual Salary _____

Employer's Name _____

Employer's Address _____

Employer's Phone _____ Numbers of Years Employed _____

Are you currently participating in a benefit plan? Circle Y/N. Does this include medical benefits? Circle Y/N. Does this include dental benefits? Circle Y/N. Is this plan through your employer? Circle Y/N.

List net monthly salary (*after* taxes and deductions) _____.

Are you currently participating in an investment plan? Circle Y/N. If Yes, list total value of investment portfolio _____. Is this plan through your employer? Circle Y/N.

If Parent/Guardian 1 does not earn a salary, please explain in detail: _____

Parent/Guardian 2 Income Information

Parent/Guardian Name _____

Occupation _____ Annual Salary _____

Employer's Name _____

Employer's Address _____

Employer's Phone _____ Numbers of Years Employed _____

Are you currently participating in a benefit plan? Circle Y/N. Does this include medical benefits? Circle Y/N. Does this include dental benefits? Circle Y/N. Is this plan through your employer? Circle Y/N.

List net monthly salary (*after* taxes and deductions) _____.

Are you currently participating in an investment plan? Circle Y/N. If Yes, list total value of investment portfolio _____. Is this plan through your employer? Circle Y/N.

If Parent/Guardian 2 does not earn a salary, please explain in detail: _____

Dependents

Please list all dependents reported on your most recent tax return.

Name	Age	Current Grade	Tuition	Amount You Pay	School to Attend Next Year

Personal Property

Do you own or rent? If you rent your property, what is the monthly rent? _____

If your property is owned, what is your monthly mortgage amount? _____

Year purchased _____ Purchase Amount: _____

Number of Automobiles: _____ Remaining Car Payment Balance, Auto 1: _____ Auto 2: _____

Automobile(s): Make, model and year _____

Household Income Sources

Please list **monthly** income amounts for each item.

Parent/Guardian 1 *net* monthly salary \$ _____

Parent/Guardian 2 *net* monthly salary \$ _____

Other contributor's (such as stepparent) wages \$ _____

Social Security benefits \$ _____

Child support/alimony* \$ _____

Veteran's pension \$ _____

Worker's compensation \$ _____

Unemployment \$ _____

Other sources of income/ \$ _____

TOTAL MONTHLY HOUSEHOLD INCOME \$ _____

* If child support/alimony is not being received per court order, please provide a separate and notarized statement detailing the circumstances, and whether or not support is being sought after.

✓ Please detail other sources of income: _____

Proof of Income

Parent(s), stepparent(s), and/or guardian(s) must include necessary proof of income or the application will NOT be reviewed.

1. A copy of last year's COMPLETE 1040 federal income tax form
2. A copy of your most recent and COMPLETE 1040 federal income tax form

If taxes were not filed, you must provide a notarized letter detailing the reason, and provide the following forms/documentation, as applicable:

1. Public Aid- proof of public assistance from the Illinois Department of Health and Family Services
2. Statement of Social Security Benefits
3. Statement of foster care from Social Services
4. Unemployment notice/statement of unemployment
5. Statement of child support payments
6. A copy of a Medicaid I.D. card (indicating candidate's coverage)
7. A current Food Stamp voucher
8. Proof of SSI (Supplementary Security Income) (indicating candidate's coverage)
9. Proof of Special Population Group (i.e. Social Security)

*Please be certain not to submit any original forms that may be needed for your own records. **A copy of a W-2 or paystub is NOT valid proof of income and will NOT be considered without complete tax forms (last year and most recent year).***

We, the undersigned, certify that all information presented for the purpose of determining financial need is true to the best of our knowledge, and that perjury or the lack of required submission materials will disqualify an application to High Jump.

Signature of Parent/Guardian 1

Signature of Parent/Guardian 2
