



APPLICATION FOR ADMISSION

Applicant Information

Applicant's Name _____
Sex Male Female Country of Citizenship _____

Date of Birth _____ Social Security # _____

Applicant is: African Amer. Native Amer. Asian Latino/Hispanic European American/Caucasian
 Middle Eastern Multi-racial Other _____

Address _____ Apt # _____

City _____ State _____ Zip _____

Home Phone _____ E-Mail Address _____

Family Data

Parent/Guardian (1) Name (First & Last) _____
____Mrs. ____Ms. ____Mr. ____Dr.

Home Address (If Different from Applicant's) _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone/Pager _____ E-Mail _____

Highest Level of Education:

Did not graduate high school GED High School Diploma Some College Two Year Degree
 College graduate Graduate school

Parent/Guardian (2) Name (First & Last) _____
____Mrs. ____Ms. ____Mr. ____Dr.

Home Address (If Different from Applicant's) _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone/Pager _____ E-Mail _____

Highest Level of Education:

Did not graduate high school GED High School Diploma Some College Two Year Degree
 College graduate Graduate school

Check if Appropriate:

Parents divorced Mother deceased Mother remarried-Stepparent's Name _____

Parents separated Father deceased Father remarried-Stepparent's Name _____

Guardian – Guardian's Name _____

If parents are divorced, who has legal custody? _____

If the applicant does not live with both parents in one household, please describe the living arrangements: _____

Who will receive grades, reports, and other mailings?

Both Parents Father Mother Guardian

Please list other children in applicant's family:

Name Age School Currently Attending

Name Age School Currently Attending

Name Age School Currently Attending

Who is financially responsible for the applicant?

Both Parents Father Mother Guardian

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

Name Relationship

Name Relationship

Name Relationship

Educational Information

Applicant's Current School _____ Current Grade _____

School Address _____

City _____ State _____ Zip _____

This school is: Public Parochial Private Charter

Please list the previous school the applicant has attended (if any), and/or any summer programs or enrichment programs attended:

School or Program _____

Address _____ Grades Attended _____

City _____ State _____ Zip _____

Neighborhood where school is located _____

Additional Information you would like to provide at this time _____

Parent Statement:

ESP appreciates the insight parents have regarding their child’s academic, social, and emotional life. Answering the questions below will help us to know and serve your child better.

Describe your child’s character and personality. _____

Describe your child’s current study and homework habits. _____

What role do you play in your child’s education? Please share your goals and expectations for your child in the coming years. _____

Why would you like your child to be a part of ESP? _____

What do you think your child will find most interesting or exciting about ESP? _____

What will be your child's biggest challenge as a part of ESP? _____

Are there any health problems, family problems or emotional issues of which ESP should be aware? _____

Has the applicant repeated or skipped a grade during his/her schooling?

Yes____ No____

If yes, why? _____

Language Background:

What language(s) is/are spoken in the applicant's home? _____

What language(s) does the applicant speak? _____

What is the applicant's first-learned language? _____

If English is not the applicant's first language, at what age did he/she learn to speak English? _____

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 you child to be considered for participation in Emerging Scholars Program (ESP) with no guarantee of final acceptance. It also authorizes ESP 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 _____

ESP 3320 Jermantown Road Oakton, VA 22124

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web: www.emergingscholarsprogram.org

E-Mail: alecesne@flinthill.org