

RELATED BACKGROUND ACTIVITIES

Applicant's Name: _____

Please list hobbies, interests and other activities in which you participate outside of the school day. Describe briefly.

1. _____
2. _____
3. _____
4. _____
5. _____

Please list academic achievements and awards. Describe briefly.

1. _____
2. _____
3. _____

Please list other achievements and awards. Describe each briefly.

1. _____
2. _____
3. _____

(if more room is needed, use additional paper)

Southeast Middle School

Student/Parent Contract

Student Name: _____ Student ID#: _____

Southeast has a shared mission to ensure that all students are academically prepared, high quality, global citizens. To maintain this high standard, all students must agree to the following:

1. Remain in good standing, meeting all program requirements
2. Take core courses at Southeast, minimum of four per year
3. Maintain academic excellence – a 2.00 unweighted overall GPA
4. Demonstrate proficiency in all state assessments prescribed by Oklahoma
5. Exhibit exemplary disciplinary conduct
6. Plan to enroll in a post-secondary educational experience upon graduation.

Academics: Because Southeast is a college preparatory school, each student must be committed to maintaining high academic standards. All students must maintain an overall 2.00 unweighted GPA.

Middle School – any middle school student who earns two semester F's during a school year may be returned to his/her home school.

High School – any senior high school student who earns two semester F's during a school year will be returned to his/her home school.

Progress reports will be sent home with students periodically. Letter grades will be awarded that reflect the student's progress to date. Only semester grades are reported on the student transcripts.

Student Conduct: Each student is expected to comply with all guidelines as outlined by the Student Code of Conduct in the OKCPS Student Handbook. Parents will be contacted on disciplinary referrals.

Attendance: Each student is expected to comply with all guidelines as outlined by Oklahoma City Public Schools Board Policy.

I have read and agree to follow the guidelines set forth by Southeast.

Student's Signature

Date

Parent's Signature

Date

Confidential Teacher Recommendation

Southeast Middle School

Applicant's Name: _____

To the Teacher: All information you provide will be held confidential. Your recommendation will be used to evaluate the appropriateness of this student's possible enrollment at Southeast Middle School.

Thank you for your time in completing this evaluation. Please **FILL IN** the appropriate box for each descriptor (on a scale of 1 to 5, 1 being least suited--5 being most suited)

	1	2	3	4	5
Academic Potential					
Intellectual Curiosity					
Ability to Concentrate					
Ability to Write					
Critical/Abstract Thinking					
Oral Expression of Ideas					
Self-Motivation					
Participation					
Seeks help					
Work well in groups					
Honesty/Integrity					

How long have you known this applicant? _____

In what capacity have you known or worked with the applicant? _____

Teacher's Signature: _____ Date: _____

School Subject: _____ School: _____

School Address: _____ Phone : _____

Additional comments (include any academic/discipline concerns):

Please enclose this recommendation in a sealed envelope (signature across seal) and return to applicant. This completed form **MUST** be submitted **WITH** completed application or mailed to the school. Application Deadline is April 1st, 2019

Confidential Teacher Recommendation

Southeast Middle School

Applicant's Name: _____

To the Administrator: All information you provide will be held confidential. Your recommendation will be used to evaluate the appropriateness of this student's possible enrollment at Southeast Middle School.

Thank you for your time in completing this evaluation. Please **FILL IN** the appropriate box for each descriptor (on a scale of 1 to 5, 1 being least suited--5 being most suited)

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Critical/Abstract Thinking					
Oral Expression of Ideas					
Self-Motivation					
Participation					
Seeks help					
Work well in groups					
Honesty/Integrity					

How long have you known this applicant? _____

In what capacity have you known or worked with the applicant? _____

Teacher's Signature: _____ Date: _____

School Subject: _____ School: _____

School Address: _____ Phone : _____

Additional comments (include any academic/discipline concerns):

Please enclose this recommendation in a sealed envelope (signature across seal) and return to applicant. This completed form **MUST** be submitted **WITH** completed application or mailed to the school. Application Deadline is April 1st, 2019