

GovsPLUS Summer 2018 Student Application Checklist



Student's Name: _____

Thank you for your interest in the GovsPLUS program! GovsPLUS (Powerful Learners Unlocking Success) is a tuition-free academic enrichment program that partners The Governor's Academy with motivated middle school students from Lawrence with the goal of helping all students reach their potential in and outside of the classroom. GovsPLUS scholars work to strengthen their academic skills, build their self-confidence, and participate in formative service and experiential learning opportunities.

The GovsPLUS program begins with a five-week summer session that will run **Monday through Friday from June 25 to July 27, 2018** on The Governor's Academy campus in Byfield, MA. There is **NO COST** for students to attend. All books, supplies, meals, and bus transportation will be provided. The bus will pick students up daily between 7:30 and 8:00 AM in Lawrence and will return home between 3:30 and 4:00 PM.

Any current 7th or 8th grade student from Lawrence who is ambitious, capable, and who can reliably attend GovsPLUS with a positive attitude is encouraged to apply. If you have any questions, please contact GovsPLUS Director, Michelle de la Guardia, by phone at 787.955.4919 or by email at mdelaguardia@govsacademy.org. Further information can also be found on the GovsPLUS website: www.thegovernorsacademy.org/govsplus

Application – Please Complete, Sign, & Submit

- I. Student Information
- II. Family Information
- III. Student Questionnaire
- IV. Student Essay

Required Documents – Please Have Student's School Complete & Submit

- Teacher Recommendation
- Copy of School Transcript

Other

- Interview (Note: Once the completed application is received, GovsPLUS will schedule short interviews with students at their school.)

➤ Application Deadline & Submission Information

Completed applications are due by **5:00 PM on Friday, March 16, 2018**. Applications and supporting documents can be submitted to Ms. De la Guardia, Director of GovsPLUS, by email to mdelaguardia@govsacademy.org or by mail to: GovsPLUS Program
1 Elm Street
Byfield, MA 01922

GovsPLUS Summer 2018 Student Application



I. Student Information

Name of Applicant: _____

Gender: Male _____ Female _____ Current Grade: 7th _____ 8th _____

Current School: _____ School Next Year ('18-'19): _____

Date of Birth: _____/_____/_____ Birth City/State/Country: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Race/Ethnicity:

- American Indian / Alaskan Native
- Asian / Asian American
- Black / African / African American
- Hispanic / Latino
- White / Caucasian
- Multiracial
- Other: _____

Language(s) Spoken At Home: _____

II. Family Information

Parent/ Guardian 1

Relationship to Student: _____
Name: _____
Address, Apt #: _____
City/State/Zip: _____
Home Phone: _____
Cell Phone: _____
Work Phone: _____
Email: _____
Parent's Language: _____
Parent's Occupation: _____
Parent's Employer: _____

Parent/Guardian 2

Relationship to Student: _____
Name: _____
Address, Apt #: _____
City/State/Zip: _____
Home Phone: _____
Cell Phone: _____
Work Phone: _____
Email: _____
Parent's Language: _____
Parent's Occupation: _____
Parent's Employer: _____

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III. Student Questionnaire – to be completed by the student

- What three phrases or adjectives best describe you?

1. _____
2. _____
3. _____

- What is your favorite subject in school? What do you like about that subject?

- What academic achievement are you most proud of? Why?

- What do you like to do outside of school? Describe your interests and involvement in extracurricular activities (ex: visual/performing arts, sports, community service, clubs, etc).

- Why are you interested in joining the GovsPLUS program this summer?

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Teacher Recommendation

Name of Applicant: _____ Current Grade: 7th _____ 8th _____

To the Teacher: *The above student is applying to GovsPLUS, a tuition-free academic enrichment program for motivated middle school students from Lawrence, MA hosted by The Governor’s Academy. We appreciate your honest and candid feedback about this student. Also, please make sure you or the student sends a **copy of their most recent transcript** with their application. Thank you!*

Teacher’s Name: _____ School/Subject(s): _____

Email Address: _____ Phone: _____

- How long have you known this student and in what capacity?

- Please circle the response that best suits the student **in relation to other students you teach**.

	<i>Outstanding (Top 10%)</i>	<i>Excellent</i>	<i>Good</i>	<i>Poor</i>	<i>No Basis for Judgment</i>
Academic motivation	4	3	2	1	N/A
Sense of responsibility	4	3	2	1	N/A
Leadership	4	3	2	1	N/A
Self-confidence (academic)	4	3	2	1	N/A
Self-confidence (social)	4	3	2	1	N/A
Creativity	4	3	2	1	N/A
Consideration for others	4	3	2	1	N/A
Works well independently	4	3	2	1	N/A
Works well with others	4	3	2	1	N/A
Curiosity	4	3	2	1	N/A
Maturity	4	3	2	1	N/A
Logical thinking	4	3	2	1	N/A
Organizational skills	4	3	2	1	N/A
Follows directions	4	3	2	1	N/A
Engagement in class	4	3	2	1	N/A

- If the student is particularly strong OR weak in any areas listed above, please elaborate.

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- What are the first three words or phrases that come to mind to describe this student?

1. _____
2. _____
3. _____

- Please comment on the student’s character, citizenship, and contributions to your community.

- Please include any additional information that provides a more complete picture of the student.

- I recommend this student to the GovsPLUS program:

With great enthusiasm With reservation
 With confidence I do not recommend
 With some confidence

Signature of Teacher _____

Date _____

- This recommendation and a copy of the student’s most recent transcript should be submitted with a completed application to Ms. de la Guardia, Director of GovsPLUS, by **5:00 PM on Friday, March 16, 2018.** Applications can be emailed to mdelaguardia@govsacademy.org or mailed to: GovsPLUS Program
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