

RIDGEVIEW HIGH SCHOOL Academy of Advanced Studies



RHS-Pre-International Baccalaureate Program Application

466 Madison Avenue Orange Park, Fl. 32065 Phone (904) 336-8905

Please complete all sections

Part 1: Students' Personal Information

Name:	(Last)		Sex:
	(First)		Grade Level:
	(Middle)		-
Street Add	ress:		
City:		State:	Zip
Current School:		Clay County Student #	
Zoned Hig	gh School:		
Date of Bir	rth: / /	(If you do not attend a Clay County birth certificate and immunization	y public school, you will be asked for a copy of your records at registration)
Home phor	ne #:	Parent's Cell phone #:	·
Father / Gu	nardian	Wo	ork #:
Mother / G	uardian	Wo	rk #:
Email addr	ress (es):		

NOTE: The selection of students for the RHS-Pre-IB program is based on standardized test scores, grades, and teacher recommendations. If you are *not* currently attending a Clay County public school, you must attach a copy of your most recent report card and your most recent standardized test scores. If you are attending a Clay County public school, we will contact your present school to obtain your grade and test score information.

This is a confidential document

Part II: Teacher Recommendations

Attached are teacher recommendations forms. Distribute these forms to your current English, Geometry or Algebra teachers. **These evaluation forms are to be returned to the IB Office at Ridgeview High School by the teachers**. Please list below the teachers' name and the specific course titles. [Example: Jane Smith; Algebra I Honors]

NOTE: Algebra 1 Honors must be completed by the end of 8th grade.

Teacher's Name (Printed)
English:
Geometry Honors / Algebra 1 Honors:
Part III: Student's Interest, Talents Please use the following lines to describe your school and community activities your interest, and any special talents <i>you</i> might have, (limit to 100 words or less)
Part IV: Statement of Intent
Please read the statement below and sign, to indicate your intent:
"I understand that the IB Prep Program (RHS-PIB) is a rigorous academic program for academically talented and highly motivated students. As a student, I am willing to strive for the attainment of the high standards required for this program. As a parent, I am willing to encourage and support, my child in striving for the attainment of high standards required for this program."
Student Signature: Date:
Parent Signature:Date:

This completed application must be postmarked by **February 28**, **2020**.

Mark attention to Kristine Guha, IB Coordinator. It can be scanned and e-mailed to Kristine.guha@myoneclay.net

This is a confidential document