

January 30, 2009

Dear Students and Families:

Thank you for your interest in Chicago Jesuit Academy! Attached you will find the application for the 2009 HAP Summer Session, open to young men entering the fifth grade for the 2009-2010 school year.

Acceptance to the HAP program will be offered to thirty-six qualified young men on a *first-come, first-served basis*. We will be sending out hundreds of applications in the coming week, so if you are interested in the Academy, **please return your completed application to us as soon as possible**. Applications may be mailed to the school, or delivered by hand to:

Chicago Jesuit Academy
at Resurrection Campus
Attn: Ms. Lauren Hogel
5058 W. Jackson Blvd.
Chicago, IL 60644

School records and teacher recommendations need not be returned with the student and family portion of the application; please do ensure, however, that these forms are returned to the Academy as soon as possible. Applications are not considered complete until these forms are received. **Often, requesting school records and recommendations in person is more effective than requests made by phone.**

At the end of the summer program, Chicago Jesuit Academy will offer admission and scholarships to twenty-four students based on their performance during the summer session. The Academy uses the following criteria in its admissions decisions:

- *Eligibility for the federal school meal program (student must be eligible)*
- *Student and family commitment to an extended school day and school year schedule*
- *Evidence of student's academic motivation and personal potential*
- *Student attendance and participation in our summer higher achievement program (HAP) (June 22nd – July 17th 2009)*
- *Good student citizenship and character*
- *Evidence of parental cooperation and support*

If you have any questions or concerns as you go through the application process, please contact Ms. Lauren Hogel, Dean of Fifth Grade Year of Studies, at 773.638.6103.

We look forward to receiving your application soon!

Sincerely,

Lauren Hogel
Dean of Fifth Grade Year of Studies

P.S. Parents of young men currently enrolled in the fifth grade for the 2009-2010 school year who are interested in transferring their son to the Academy for their sixth grade year should contact Dr. Zajdel, at 773-638-6103.



Chicago Jesuit Academy
at Resurrection Campus
5058 W. Jackson Boulevard
Chicago, Illinois 60644
Phone: 773.638.6103, Fax: 773.638.6107

APPLICATION FOR ADMISSION
CHICAGO JESUIT ACADEMY
HIGHER ACHIEVEMENT PROGRAM (HAP)

Chicago Jesuit Academy is a full-scholarship, college-preparatory Jesuit, Roman Catholic middle school for boys of modest economic backgrounds from the West Side of Chicago. Chicago Jesuit Academy uses small classes, an extended academic day and a longer school year to prepare students for success in college-prep high schools, universities and positions of community leadership. Chicago Jesuit Academy succeeds as a full-scholarship middle school because of the disciplined sacrifices made by our students, parents, faculty, staff, volunteers and benefactors.

Chicago Jesuit Academy provides a structured academic program for boys in grades five through eight, while promoting academic, social, and spiritual development. Students are enrolled without regard to race, religion or ethnicity. The following factors are used in consideration for admission to the Academy:

- *Eligibility for the federal school meal program (Student must be eligible. Special consideration may be made for families experiencing financial hardship.)*
- *Student and family commitment to an extended school day and school year schedule*
- *Evidence of student's academic motivation and personal potential*
- *Student attendance and participation in our summer Higher Achievement Program (HAP) from June 22nd – July 17th, 2009*
- *Good student citizenship and character*
- *Evidence of parental cooperation and support*

IMPORTANT DATES:

- **January 30, 2009:** Applications for 2009 HAP are available.
PLEASE NOTE: Completed applications are considered on a first-come, first-served basis.
Please mail or hand-deliver completed applications to:
Chicago Jesuit Academy
at Resurrection Campus
Attention: Ms. Lauren Hogel
5058 West Jackson Boulevard
Chicago, Illinois 60644
- **Monday, June 22, 2009:** Summer Higher Achievement Program (HAP) begins at 8:00 AM.
- **Week of July 20, 2009:** Parents and students complete admissions interview at the Academy.

FATHER

MOTHER

Name: _____

Address: _____

Occupation: _____

Employer: _____

Position: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Student currently lives with: _____ How long? _____
 (Name) (Relationship to child?)

Information about Chicago Jesuit Academy should be sent to: _____
 (Name of Primary Contact Person)

 (Address, if different from above)

Brothers and Sisters:

<u>NAMES</u>	<u>AGE</u>	<u>GRADE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Religious affiliation (*optional*): _____

Church or Parish (*optional*): _____

Ethnic Background – Please circle as many as you feel appropriate. (*optional*):
 Please note the Academy does not discriminate on the basis of race, religion, color, nationality, or ethnic origin in the administration of its educational policies and scholarship, athletic, and other school-administered programs.

- African American Asian Caucasian Hispanic/Latino
- Native American Other: _____

PARENT QUESTIONNAIRE (Note: Answers to these questions on their own will not in any way disqualify young men from admission to the Academy. Although we are not a residential school or a school for young men with unusual needs, we work with young men who confront and have confronted major life challenges. The more complete our information, the better the decisions we can make, and the better we can serve our students.)

Does your child suffer from any serious illness, disability, physical or emotional limitations, depression or other mental illness? (*Circle one*) **Yes** or **No**

Does your child have hyperactivity or ADD? (*Circle one*) **Yes** or **No**

Has your child experienced significant **behavioral** struggles? (*Circle one*) **Yes** or **No**

If "Yes" to **any of the above**, please explain: _____

Is your child presently enrolled in any type of special education program or counseling at the school he attends, or at some other place? (*Circle one*) **Yes** or **No**

If "Yes," please explain: _____

Please describe your son's **academic** strengths and weaknesses: _____

Has he skipped or repeated any grades? (*Circle one*) **Yes** or **No**

If "Yes," please explain _____
(Grade) (Skipped or Repeated?) (Reason)

Please describe your son's **personal** strengths and weaknesses. _____

Does your child have asthma? (*Circle one*) **Yes** or **No**

Why do you wish for your son to attend Chicago Jesuit Academy? (*Please feel free to attach a sheet to explain any special circumstances that make this student particularly deserving of admission.*)

IMPORTANT NOTE:

It is my understanding that Chicago Jesuit Academy is an academically challenging school with a compulsory code of attendance, dress, and conduct and that full participation of parents or guardians is necessary in order to meet the requirements of the program.

FURTHER REQUIREMENTS FOR APPLICATION TO CHICAGO JESUIT ACADEMY:

1. Completed *Household Eligibility Application for the National School Lunch and Breakfast Programs* (see p. 7) **with a copy of most recent 1040 or copy of most recent pay stub**
2. Grade school transcripts (2nd grade - present), including standardized test results and report cards (see p. 8)
3. Recommendation from student's current teacher (see p. 9)
4. All parents and students will interview with the Leadership Team of Chicago Jesuit Academy as the final step in the admissions process for the Academy.

Parent/Guardian signature: _____ Date _____

ELEMENTARY SCHOOL CONTACT INFORMATION

School name: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Principal: _____ Telephone: _____

Name of student's teacher: _____
(Teacher who will complete student's 4th-grade recommendation)

POLICY OF NON-DISCRIMINATION

Chicago Jesuit Academy admits students of any race, religion, color, nationality, and ethnic origin to all rights, privileges, programs and activities generally accorded or made available at the school. The Academy does not discriminate on the basis of race, religion, color, nationality, or ethnic origin in the administration of its educational policies and scholarship, athletic, and other school-administered programs.

PLEASE NOTE: Completed applications for admission should be mailed to:

**Chicago Jesuit Academy
at Resurrection Campus
Attention: Ms. Lauren Hogel
5058 W. Jackson Boulevard
Chicago, Illinois 60644
Phone: 773.638.6103, Fax: 773.638.6107**

PERMISSION TO FORWARD ELEMENTARY SCHOOL GRADES

DIRECTIONS FOR PARENTS: Please sign this form, detach it from the admission packet, and take it to your son's present school and have them forward his academic records as soon as possible to:

**Chicago Jesuit Academy
at Resurrection Campus
5058 W. Jackson Boulevard
Chicago, Illinois 60644
Phone: 773.638.6103, Fax: 773.638.6107**

I give my permission for copies of the educational information, requested below, for my son

(_____) *to be sent to Chicago Jesuit Academy.*
(Student's Full Name)

Signed: _____ Date: _____
(Parent/Guardian)

FAMILY EDUCATION RIGHTS AND PRIVACY ACT OF 1974:

Under the provision of this act you have the right, if your son is enrolled at Chicago Jesuit Academy, to review his educational records. The act further provides that you may waive your right to see recommendations for admission. I hereby waive any right of access that I may have to review any recommendation forms.

Signed: _____ Date: _____
(Parent/Guardian)

To the Student's Current Principal/Registrar:

Please send the following information to the address listed above at your earliest convenience.

- € Current report card and previous two years' end-of-year reports
- € Student's standardized test scores from grades 2, 3 and 4 (and 5 if available)
- € Student's other school records relevant to admission (i.e., special program placement, disciplinary records, IEP, additional educational assessments)

Did the student qualify for the Federal free or reduced lunch program during the 2008-09 school year? Circle one: Yes or No

Name: _____ Title: _____
(Print name of person completing this form.)

Signed: _____ Date: _____
(Signature of person completing this form)

To School's Principal and/or Registrar: *Thank you for your prompt response!*

