

New Frontiers Secondary School  
Application

**Please attach Transcript**

**Student Information**

Student's Name	Date of Birth
Street Address	Age: School Presently Attending:
Telephone Number	Total High School Credits Earned to Date:
Who Recommended you to New Frontiers?	Previous School Address and Phone Number
Are you on probation or parole?	Name of probation/parole officer  Phone number:
Do you need daycare services?	Are you currently on suspension/expulsion?

Why do you believe attendance at New Frontiers will be a positive experience?

**Parent/Guardian Information**

Father's Name	Mother's Name
Address	Address
Home Phone	Home Phone
Work Phone	Work Phone
Legal Guardian - <b><u>IF Not Mother or Father</u></b>	Address
Guardian's Address	Guardian's Employer
Home Phone	Work Phone

## ACADEMIC HISTORY

How do you rate your ability to learn? High \_\_\_\_\_ Medium \_\_\_\_\_ Low \_\_\_\_\_

**Which math class were you enrolled in last year?**

In which subject (s) do you need special help?

Have you ever been in a Special Education class? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when, where and what subject (s)?

How many hours of homework do you normally complete each day?

What kinds of problems have you experienced in the past that have kept you from succeeding in school?

List three (3) specific ways you believe *Alternative* education will help you achieve where other programs have not:

What are your academic goals for this year?

## ATTENDANCE POLICY

Attendance is a critical element in successfully completing the program requirements. Students are required to present written excuses from the parent/guardian or doctor, for all absences within three days of their return to school. Parents should call the school if their student will be absent. Under the current requirements established by the State of Washington, school districts may file a petition to **Compel Attendance** with the District Attorney for the county in which the school is located if: The student has five unexcused absences within a calendar month and has not met with the school to discuss ways to improve the student's attendance, or; if the student has ten or more unexcused absences within the term of the school semester.

### Student

### Guardian

- I have read and agree to each of the conditions set forth in this application.
- I also understand the requirements for the minimum number of hours per week, the hours of supervised activity required before credit will be granted, and the consequences if I fail to meet these requirements.

- I, (we), the parent or legal guardian have read and agree to the conditions set forth in this application.
- I understand the attendance requirements and further understand the procedures if my child has unauthorized absences, including court action.

Student's Signature

Parent/Guardian Signature

Date

Date