



CMS AVID Application AVID and AVID Excel



Please complete the following application. Applications due to **Lisa Senne** at CMS by February 28th.

3 ways to turn in your application:

Email:
Lisa_Senne@edenpr.k12.mn.us

Mail:
8025 School Road
Eden Prairie, MN 55344

Classroom Teacher:
Give to your classroom teacher by
February 24th

Applicants First Name: _____ Applicants Last Name: _____

Parent/Guardian Name(s): _____

Guardian email address: _____ Guardian Phone number: _____

Section 1:

These questions help the AVID site team learn about each applicant. For this reason, we ask students to respond to each prompt **without** adult input. Each question should be answered thoughtfully and in complete sentences.

Why are you interested in joining AVID?

What are your strengths as a student?

Think about a challenge you have had in school. Describe how you responded to that challenge.

How have you tried to improve your grades this year? Use a specific example in your response.

Section 2:

Think of two teachers you have had this year. After you provide their names, the AVID site team will contact them to provide a recommendation for you.

First and Last Name of Recommending Teacher #1: _____

School (circle one): Prairie View Oak Point Eagle Heights Eden Lake Cedar Ridge Forest Hills CMS

Recommending Teacher #2: _____

School (circle one): Prairie View Oak Point Eagle Heights Eden Lake Cedar Ridge Forest Hills CMS

Section 3:

Parents/guardians, please help students with this section of the application. Please complete the following information for administrative purposes. This information is use to document equity and diversity within the local and national AVID program.

Applicant's current year in school (please circle): 6 7 8 9 10

Has the applicant ever been accepted to AVID before (please circle)? Yes No

Does the applicant have a sibling in the AVID program (please circle)? Yes No

What is the applicant's ethnicity/ethnicities or race(s): _____

What language is spoken most frequently at home? _____

If known, what is the highest level of education completed by the applicant's parent/guardian (please circle)?

Elementary School Middle School High School GED Some College 2-Year Degree 4-Year Degree

If your student comes from a household with more than 1 parents/guardians, please list any other levels of education completed: _____

Student/Parent Commitment:

Parent/guardian, by signing below, you agree to support your student as they work towards acceptance into college.

X _____

AVID applicant, by signing below, you agree to maintaining passing grades while taking rigorous courses, putting forth your best effort, and supporting your classmates.

X _____