

ANCHOR Boarding Program Application

Dear Applicant,

We are glad that that you are taking the time and the initiative to apply to the **ANCHOR** Boarding Program. **ANCHOR** is an organization that helps inner city schools establish boarding programs. **ANCHOR** is in partnership Bishop Loughlin Memorial High School to provide need-based scholarships for students who want to participate in a boarding program that offers a structured and supportive living environment where students can flourish both personally and academically. This application will be reviewed by both **ANCHOR** and Bishop Loughlin Memorial High School. Please note: only male students are eligible for admission to the **ANCHOR** Boarding Program at Bishop Loughlin Memorial High School, in Ft. Greene Brooklyn.

In order for you to be considered for admission, you need to take the following steps:

1) Written Application:

The application **must be completed with every question answered** in order to be reviewed. Applications must be completed by the student and the parent or guardian. The student section must be filled out by the student only and therefore should be in the student's handwriting. Applications are due no later than **May 1, 2006** and must be mailed to **ANCHOR** at the address below.

2) Letter of Support:

Each applicant needs a letter of support to be completed by a teacher, guidance counselor, or a local organizational leader. This individual should be able to comment on how they feel that the boarding program will make a difference in the student's performance. The recommendation letter can be mailed with your written application, which is preferred, or it can be sent separately as long as it is mailed by **May 1, 2006**.

3) School Records:

Applicants must submit a copy of their most recent report card. This report card should be sent with the application.

4) Proof of Income:

In order to be considered for a scholarship, the applicant's family must submit proof of income with the application by **May 1**.

5) Interview and Overnight:

Selected applicants and their parent(s) or guardian(s) must participate in an interview conducted by the school and **ANCHOR**. Additionally, any student who wishes to be considered for the boarding program must spend one night in the dormitory to experience residential life. No applicant will be considered for admission without this experience.

**Mail completed applications to:
Bishop Loughlin Memorial High School
Anchor Program, Mr. Ray Walker
357 Clermont Avenue
Brooklyn NY, 11238**

Good luck and we look forward to receiving your application!

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Part A: General Student Information

Name: _____
(Last) (First) (Middle)

Preferred Name: _____ Date of Birth: _____ / ____ / ____
(Mo.) (Day) (Yr.)

Sex: Male _____

Present Address: _____ Apartment #: _____
(Street)

City/State: _____ Zip Code: _____ Home phone: _____

Who referred you to the program? _____

Part B: Family Information

Full Name(s) of Parent(s) or Guardian(s):

(Name)

(Name)

(Relationship to Applicant)

(Relationship to Applicant)

(Daytime Phone)

(Daytime Phone)

(Cell)

(Cell)

Who does the applicant currently live with?

Full Name of Parent (s) or Guardian (s): _____

Relationship to Applicant _____

Daytime phone for Parent (s) or Guardian (s): _____

Cell phone for Parent (s) or Guardian (s): _____

Full name (s) and age (s) of sibling (s): _____

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Part C: Educational Profile

Current School: _____ Current Grade: _____

Years Attended: _____ Grade you will enter in September 2006: _____

Activities/Hobbies: _____

Honors/Achievements: _____

Part D: Student Personal Section

In your own handwriting, please take the time to answer the following questions. Your answers should be about a paragraph each.

Question 1: *Family History: Please give us a brief description of your family and your family history.*

Question 2: *What did you like **most** about the school that you last attended? What did you like the **least** about the school you last attended?*

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Question 3: *Describe one problem in your community and what you would do to fix it if you were Mayor.*

Question 4: *Name one or two things you would like to change in your life.*

Question 5: *Why do you want to be a part of the boarding program? What are some of your goals and how would participating in the boarding program help you achieve these goals?*

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Question 6: *Why do you feel that this program will make a difference in your performance in school?*

Question 7: *Being a part of the boarding program means living with and around a number of people. Name two or three positive characteristics you would like to develop. How would you contribute to community life?*

Question 8: *Being a part of the boarding program also means developing a relationship with an adult mentor. Why would you look forward to this relationship and what do you hope to gain from it?*

Applicant's Signature: _____ **Date:** _____

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Part E: Letter of Support

Applicant's Full Name: _____

To the Recommender: The applicant named above is applying to Bishop Loughlin Memorial High School for admission to the school and to the boarding program. Applicants are reviewed by the school and by **ANCHOR**, who provides need-based scholarships for this boarding school experience. **ANCHOR**'s mission is to foster the personal and academic growth of at-risk youth by providing students with a comprehensive boarding program. You are an important part of the student's application process. You possess a unique perspective when it comes to evaluating the applicant. Bishop Loughlin and **ANCHOR** hope to learn more about the characteristics of the applicant that demonstrate the need for this unique opportunity. Please take the time to briefly but thoughtfully answer the following questions.

Name of Recommender: _____

School/Organizational Affiliation: _____

Daytime Phone Number: _____ **Email:** _____

Question 1: *For how long, and in what capacity have you known the applicant?*

Question 2: *In your opinion, how has this student demonstrated a need for the boarding program? Why do you think that the boarding program will make a difference in this youth's performance?*

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Question 3: Briefly discuss the applicant's strengths and weaknesses as a student and as a person. What would they contribute to the residential community? What challenges would they face?

Question 4: Describe the applicant's class participation and her relationship with other students.

Question 5: Has the applicant had any disciplinary problems? If so, please explain.

Question 6: Does the applicant have an unusual amount of absences from school? If so, please explain.

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Please rate this applicant in relation to her peers in the following areas:

Character Trait	<i>Below Average</i>	<i>Average</i>	<i>Above Average</i>
Ability to adjust			
Concern for others			
Leadership qualities			
Maturity			
Emotional stability			
Honesty			
Ability to manager anger /conflict			
Positive Attitude			
Sense of Responsibility			

In the space below, please feel free to provide any additional relevant information to consider:

Signature of Recommender: _____

Date: _____

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Part F: Family Financial Information

Father (or Guardian)

Mother (or Guardian)

Name _____

Name _____

Address _____

Address _____

Occupation _____

Occupation _____

Annual Salary _____

Annual Salary _____

Years at Current Position _____

Years at Current Position _____

If Unemployed, Since (Date) _____

If Unemployed, Since (Date) _____

Who is financially responsible for the applicant? _____

How many family members does this person claim as dependents? _____

Proof of Income:

You must submit one of the following with this application:

- ✓ A copy of your **latest Tax Return** AND copies of **2 current pay stubs** from all jobs
- ✓ Documentation of government benefits
[Special Population Group / Medicaid / Food Stamps / SSI (Supplemental Security Income)]

Is your child receiving any other financial aid towards tuition? If yes, please explain (who is providing the scholarship, how much scholarship money was awarded, etc.).

How much Federal Income Tax did you pay last year? _____

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Do you receive food stamps? Yes / No Amount Received _____ How often? _____

Do you receive public assistance? Yes / No

Amount Received _____ How often? _____

If you are receiving Social Security, what is the amount received each month: _____

For You \$ _____ For your Spouse \$ _____ For Children \$ _____

If separated or divorced, how much money do you receive from your spouse? \$ _____

Do you have any other sources of income? Yes / No If Yes, please explain:

OPTIONAL

Parent / Guardian Statement of Need: _____

Name of Parent / Guardian: _____

Signature: _____

Date: _____

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Part G: Parent or Guardian Section

Please complete the following questions listed below. You must answer each question in order to have your application considered.

Question 1: *The admissions process for Bishop Loughlin Memorial High School and the boarding program was initiated by: (circle one)*

- A) The applicant B) The parent or guardian C) Other (please explain)

Question 2: *Does your son take medicine for any illness on a regular basis and if so can you briefly describe this medical condition? (this includes inhalers for asthma). Also, has your son been hospitalized in the past year? If so, please explain.*

Question 3: *Describe your son's relationship with her/his peers and her/his family.*

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Question 4: *Please describe your son's study habits.*

Question 5: *If there are any circumstances that may have affected or may potentially affect your child's performance please explain.*

Question 6: *What do you most want your child to gain from attending/Bishop Loughlin as a boarder and living in the boarding program?*

Parent / Guardian Signature

Date

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Parent / Guardian Success Circle

The boarding programs hold monthly meetings for parent and guardians of the boarders. These Parent / Guardian Success Circle Gatherings are a vital part of the Boarding Program. They are designed to provide valuable information and support for each parent and guardian while also involving parents and guardians in the development and success of both the program and their child. It is a high priority expectation that a parent / guardian (or person representing the parent / guardian) attend each meeting.

I commit myself (or a representative) to participate in at least 5 Parent / Guardian meetings a year.

Parent / Guardian Signature

Date

Permission Release Information:

If my child is accepted into the **ANCHOR** boarding program, I hereby agree to the following:

- 1) That any information pertaining to the educational and personal well being of my child may be provided to Bishop Loughlin Memorial High School and to **ANCHOR**. This includes report cards, progress reports, and other relevant information.
- 2) To send a copy of my son's final transcript of the year to the school.
- 3) Grant Bishop Loughlin and **ANCHOR**, permission to publish my child's name and / or photograph in any medium whatsoever that is in direct association of either organization including but not limited to, websites, annual newsletters, brochures and other marketing materials.

Name of Parent / Guardian – (*Print*)

Signature of Parent / Guardian

Date