

Admission Requirements

The charter school shall not charge an application fee nor shall it charge tuition. The charter school shall be nonsectarian in its admission and enrollment policies and shall not discriminate against any student on the basis of ethnicity, national origin, gender, or disability.

The Mark West Charter School will actively recruit a diverse student population from the district and surrounding areas who understand and value the school's mission and are committed to the school's instructional and operational philosophy. Admission to the school shall be open to any resident of the State of California. Prospective students and their parents or guardians will be briefed regarding the school's instructional and operational philosophy and will be informed of the school's student-related policies. The school will establish an annual recruiting and admissions cycle, which shall include reasonable time for all of the following: (1) outreach and marketing, (2) orientation sessions for parents and students, (3) an admissions application period, (4) an admissions lottery if necessary, and (5) enrollment. The school may fill vacancies or openings that become available after this process using either a waiting list or any other non-discriminatory process. (In the case of Home Study students admission is open to students residing in Sonoma County or any contiguous county per Ed code section 51474.6 and 46300.2).

In the event that the number of students seeking admission to any grade or class exceeds capacity, the school shall have the right to grant priority in admissions to siblings of current students, children of staff, and residents of the charter-granting district or county.

Enrollment in the Mark West Charter School requires the following:

- Student Registration form
- MWCS Student and Parent Pledge
- Parent/Guardian Application Questionnaire and Student Application Questionnaire
- Request for Email Address for Jupiter Grades (for 7th and 8th grade students only)
- Student Profile must be submitted by the student's current teacher
- Birth Certificate
- Immunizations
- Home Language Survey (if applicable)

NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

Existing students of the Mark West Charter School who have successfully honored the student pledge and policies of MWCS will be guaranteed a placement for the following year.

Intentionally left blank for two-sided copying



4600 Lavell Road, Santa Rosa, CA 95403

Phone: (707) 524-2741

Fax: (707) 524-2782

STUDENT REGISTRATION FORM

Child's LEGAL Name: _____
Last First Middle

Program: Regular Program Home Study Program Non-Binary **Grade Entering:** _____

SEX: M F **Date of Birth:** _____
Month Day Year

Address: _____

City: _____ Zip: _____ Phone: _____

Previous School: _____
City: _____ State: _____ Zip: _____ Phone: () _____

Date Stamp Rec'd _____
Application # _____
Enter Date: _____
Permanent ID: _____
_____ Tdap Booster (Pertussis)
_____ Immunization Record
_____ Emergency Form
_____ Review Records/Rights Notif.
_____ Cum Request (Date: _____)

Birthplace: City: _____ State: _____ Country: _____ **US Citizen:** Yes No
Date first attended school in the U.S.: _____ Date first attended school in California: _____
Month Day Year Month Day Year

Mother/Guardian's Name: _____
Last First Relationship

Father/Guardian's Name: _____
Last First Relationship

Other's Name: _____
Last First Relationship

Mother's email: _____ Father's email: _____

Parent/ Guardianship Information (with whom the student lives) (Please check all that apply)
 Father Mother Both Step-Father Step-Mother Guardian Foster/ Group Home Other: _____
Is the above checked person(s) the student's LEGAL guardian? Yes No If No, please complete a "Caregiver Affidavit"
Is there any LEGAL or GUARDIANSHIP information about your child we should be aware of? Yes No
If YES, please check one: Joint Custody Sole Custody Guardian **and attach copies of LEGAL DOCUMENTS.**

Student Programs & Behavior
This information will be used for staff purposes only, and will not be used as admission criteria.
Please check any student programs your student has been enrolled in:
Special Education: Resource (RSP) Special Day Class (SDC) Speech/Language 504 Full Inclusion
Other Programs: Gifted (GATE) Remedial Math Remedial Reading Counseling English Language Development
 Help to Improve Attendance/ Behavior Other (Specify) _____
Are there psychological or confidential reports available from your student's former school Yes No
Has your student been suspended? Yes No Has your student ever been expelled? Yes No

Residence - where is your child/family currently living? (Federally mandated by NCLB) – check all that apply
 In a single family permanent residence (house, apartment, condo, mobile home) In a motel/hotel
 Doubled-up (sharing housing with other families/individuals due to economic hardship or loss) Unsheltered (car/campsite)
 In a shelter or transitional housing program Other (specify) _____

Brothers, Sisters, Others in Your Home (Please state name, relationship, birth date/grade)
1. _____ 2. _____
3. _____ 4. _____

Highest education level by either parent/guardian (Confidential information needed for State Testing)

- Graduate school / Post-graduate training College graduate Some college (includes AA Degrees)
 High school graduate Not a high school graduate

Duplicate Mailing

If divorced/separated & joint custody allows duplicate mailing/information to be given to other parent, please include their name, address, and phone number:

Full Name: _____ Phone #: () _____

Address: _____

***Please provide 2 self-addressed stamped envelopes. Reports are mailed for the 2nd and 4th quarters.*

Ethnic Data

(Confidential information needed for Federal/State reports)

What is your student's ethnicity? (Please check one)

- Hispanic or Latino Not Hispanic or Latino

Racial Data

(Confidential information needed for Federal/State reports)

Please select one or more boxes to indicate what you consider your student's race to be.

- African American or Black (not of Hispanic origin) Filipino / Filipino American
 American Indian or Alaskan Native: of Native American descent (for example, descendants of the Navajo, Pomo, Aztec, Inca, or Mayan people)
 White: Of European descent (for example, descendants of the Spanish, French, Italian or Portuguese people)

Asian

- Chinese
 Japanese
 Korean
 Vietnamese
 Asian Indian
 Laotian
 Cambodian
 Hmong
 Other Asian

Pacific Islander

- Native Hawaiian
 Guamanian
 Samoan
 Tahitian
 Other Pacific Islander

Is either parent/guardian on active duty in the US Armed Forces (Army, Navy, Air Force, Marine Corps, or Coast Guard) or on full-time active duty with the National Guard?

- YES NO

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Parent / Guardian Signature

Date

Verified by: _____

MWCS Student, Parent and Faculty Pledge

It is important that families and schools work together to help students achieve high academic and character standards. The following are agreed upon roles and responsibilities that we as partners will carry out to support student success in school and life. We understand that fulfilling these responsibilities is considered an important way for all of us to support our school.

By signing this pledge, we are each committed to working together for our success. Each of us has an important role to play in order to create a positive and productive learning environment. The extent to which we each do our part determines our success.

Student Pledge

As a student I will:

- Maintain a good attendance record and commit to the academic calendar.
- Effectively utilize all of the time in the school day.
- Keep my backpack, books and materials organized.
- Show responsibility and trustworthiness in all that I do.
- Communicate with my parents daily about school so they can be informed and can help me when I need it.
- Commit myself to completing my assignments on time and in a quality manner.
- Treat everyone with respect.
- Participate in service learning projects.
- Use all technology wisely and appropriately.
- Set goals for my learning and my participation in the community.
- Abide by the school rules and conduct myself in a responsible manner.

Student Signature: _____

Parent Pledge

As a parent or guardian I will:

- Demonstrate to my child through my actions and deeds that learning and education are important.
- Commit to the academic calendar and ensure my child's regular school attendance.
- Uphold expectations set by the school
- Send my child to school with backpack, books and materials organized.
- Support and participate in school activities.
- Volunteer as much as I am able so I know my teen's friends and help build school success.
- Support service learning opportunities.
- Support appropriate technology use
- Update myself regularly about my child's progress, and if I have questions or concerns, contact the staff right away.
- Treat everyone with respect.

Parent/Guardian Signature: _____

Faculty Pledge

As a member of Mark West Charter School staff we will:

- Ensure quality education for every student, addressing each child's learning modality.
- Communicate and hold high expectations for every student.
- Endeavor to motivate our students to learn.
- Teach and involve students in classes that are interesting, challenging and relevant.
- Provide a safe learning environment for all students.
- Communicate regularly with families regarding student progress.
- Provide opportunities for parents to volunteer at school and at home.
- Work with parents to resolve difficulties so that the students can be successful.
- Continue to research new educational theories and apply best practices.
- Treat everyone with respect.

Faculty Signature: *Mark West Charter School Staff and Administration*

MWCS Parent/Guardian Application Questionnaire

Parent's Name: _____ Date: _____

Student's Name: _____

1. I am interested in the Mark West Charter Independent Home Study Program for my child because:

2. What areas of strength do you feel your child has?

3. What areas of weakness do you feel your child needs to develop to fulfill his/her potential?

4. What Math class/book was your student using last year and what grade did he/she receive?

5. In order to help us best meet the academic and social needs of your student, please let us know any programs your student has been involved in. (Examples: Academic support, GATE, Counseling, RSP, 504 Plan, English Language Support).

6. How did you hear about Mark West Charter Independent Home Study Program?
 Elementary School Word of Mouth Other: _____
 PTA Directory MWCS Website

MWCS Student Application Questionnaire

Name: _____ Date: _____

Current School: _____ Current Grade: _____

Please answer the following questions in your own words.

1. Why are you interested in becoming a student at the Mark West Charter Independent Home Study Program?
2. What do you feel are your greatest challenges and greatest strengths in school?
3. What have you liked about school in the past and what are your hopes for the next school year?

Mark West Charter School Student Profile

(To be filled out by current teacher, please return signed and in a sealed envelope)

Thank you for taking the time to fill out this student profile. Please return this form directly to Mark West Charter School, 4600 Lavell Road, Santa Rosa, CA 95403. If you have any questions, please contact us at 707-524-2741.

Student Name: _____

Grade: _____ School: _____

District: _____ Current Teacher's Name: _____

The above student is applying to Mark West Charter School. Your responses are valuable in helping us make sure students will succeed in our program

	Good	Fair	Poor	N/A	Inconsistent
Homework Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group Work/Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Directedness/ Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Strengths: _____

Concerns: _____

Classroom Conduct: _____

Additional Comments (Be Specific): _____

Signature of Teacher: _____

Intentionally left blank for two-sided copying