

# Buffalo Prep Program Application 2010

University at Buffalo – 18 Acheson Annex – Buffalo, NY 14214 – (716) 829-3605

Please mark the box that corresponds with the program for which you are applying:

Middle School Prep

Students entering 6<sup>th</sup> or 7<sup>th</sup> grade in Fall 2010

High School Prep

Students entering 8<sup>th</sup> grade in Fall 2010

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Candidate is: 1. Male \_\_\_\_\_ Female \_\_\_\_\_

2. African American \_\_\_\_\_ Native American \_\_\_\_\_ Hispanic \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Present School: \_\_\_\_\_ Grade: \_\_\_\_\_

School Address: \_\_\_\_\_

School Telephone: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Day Telephone: \_\_\_\_\_

Evening Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Day Telephone: \_\_\_\_\_

Evening Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Previous schools your child has attended and years:

	<u>School</u>	<u>Grade</u>	<u>Dates of Attendance</u>
1.			
2.			
3.			
4.			

Did your child ever skip or repeat a grade? If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Does your child have any health problems that might interfere with his/her participation in the Buffalo Prep program? If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(over)

## Buffalo Prep Program Application 2010 cont.

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Dear Director:

I give permission for Buffalo Prep to administer tests of academic ability, including group administered tests, individually administered tests, questionnaires, and short essays concerned with the attitude to my child, \_\_\_\_\_, as part of the evaluation process for the Buffalo Prep Program. I also understand that the results will not be entered into public school records or reported to parents other than at an individual conference.

I give permission for Buffalo Prep to request, from my child's school, a copy of the most current report card and other academic information regarding my child's study skills, motivation, attendance, and personality traits that may be relevant to a decision concerning my child's possible success at Buffalo Prep. I also give consent for such information to be requested orally from the teacher(s) should time not permit for written materials to be sought.

I hereby declare that the consent herein granted is voluntary.

Parent/Guardian: \_\_\_\_\_  
(Signature) (Printed) (Date)

Parent/Guardian: \_\_\_\_\_  
(Signature) (Printed) (Date)

I give my child permission to participate in all Buffalo Prep activities on and off site.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

I give Buffalo Prep permission to photograph and videotape my child for promotional fundraising purposes in print media, television and on the Internet.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**\* Please provide a current report card and proof of income (most recent IRS tax form) with your application.**

**\*\* When submitting the application, please include a \$50 application fee. If paying by check or money order, please make payable to Buffalo Prep. Upon acceptance, the \$50 will be credited toward your program fee. If your child is not accepted, the fee will be returned.**