

Application Part I: Personal Data

For the year 2016-2017

STANDARDS AND EXPECTATIONS

In order to remain in the Fairview IB Prep Magnet Program, students must:

- Demonstrate a high degree of motivation and interest towards excellence in academics.
- Practice exemplary self-discipline and academic maturity.
- Conform to behavior standards set forth by the Leon County Schools and Fairview Middle.
- Understand that grade point averages below 2.5 or a D grade in any class, or unacceptable behavior, results in probationary status and/or dismissal from the magnet program if not corrected in a timely manner, at the discretion of the IB Prep administrator and faculty/staff.
- Complete the Community Service requirement.

STUDENT INFORMATION

Student Name _____ LCS ID Number _____
Last First Middle If Applicable (on report card)

Date of Birth: _____ Current Grade: _____

Zoned Middle School: _____ Current School: _____

Home Address _____

(Complete home address with number and street, not P.O. Box. - Physical location is necessary)

City State Zip Code
Full Mailing Address (if different from above) _____

PARENT/GUARDIAN INFORMATION

Mother/ Female Guardian's Full Name Home Phone Work Phone Cell Phone

Father/Male Guardian's Full Name Home Phone Work Phone Cell Phone

Parent E-Mail Alternate Parent E-Mail (If applicable)

SIGNATURES

This application is being submitted for consideration for acceptance in the International Baccalaureate Preparatory Program at Fairview Middle for the academic year. We verify that the information submitted is accurate as of this date. We give permission for school records to be released upon request to Fairview. Students and parents accepted into the program will receive an admissions agreement whereby the student will be assigned to Fairview Middle School for the academic year regardless of status in the program. In the spring of each school year, the student will have the option of signing a new Admissions Agreement for the next academic year or returning to their zoned school. My signature below acknowledges agreement to all standards and expectations outlined hereto.

Student Parent/Guardian

Date Date

Signatures are for application into the Fairview Middle School IB Prep Magnet Program only. Transfer to Fairview Middle School will occur **only** upon acceptance in the program and execution of the Admissions Agreement.

- Check if student is a legacy (student has or had a sibling in the FMS Magnet Program). Informational purposes only and does not affect the status of the application.
Sibling Name: _____ Entrance Year into Magnet Program: _____

Completed applications and school choice forms must be submitted to Fairview Middle School front office on or before March 1, 2016, 4pm.

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Application Part II: Additional Documentation Required

The following documents are required and must be submitted as part of a student's application. Applications cannot be reviewed for admission until all documentation has been received.

- ❑ **Copy of student's most recent report card**
- ❑ **Reference form from CORE academic teacher, enclosed (please inform the teacher completing the form, if mailing separately, that it must be received by March 1st, 2016).**
- ❑ **Documentation of most recent standardized test scores (FSA, FCAT, SAT 10, Iowa, etc).**
- ❑ **Honor Code agreement signed by parent and student (enclosed).**
- ❑ **Graded writing sample (See instructions below).**
- ❑ **Leon County School Choice Form (required for all students applying for IB Prep Magnet). This form must be signed by your zoned school, your requested school (FMS), and returned to Fairview with your application.**

Writing Sample

Each student is required to submit a graded writing sample

The writing sample should be between 100 – 200 words in length, must have been written by the student and graded by a core academic teacher during the current academic year. The sample *could* be, but is not limited to: a lab report, an in-class paper, a book report, a research paper, a 5-paragraph essay, etc.

Return completed application with ancillary material to:

Fairview Middle School
Attn: Eileen Mayer, IB Prep Coordinator
3415 Zillah Street
Tallahassee, FL 32305
FAX: 850.922.6326

MINIMUM CRITERIA

- *Documentation of scores on a national or state standardized academic achievement test indicating a score of 4 or better in math and reading (FCAT/FSA) or above grade level (date of test must be within one academic year of application).*
- *Completed application with all ancillary material (writing sample, honor code, teacher reference form, test scores)*
- *Completed Leon County Schools School Choice Request Form (This form will only be utilized if the student is accepted into the FMS Magnet program; otherwise it will be considered null and void).*

Completed applications and school choice forms must be submitted to Fairview Middle School front office on or before March 1, 2016, 4pm.

**FAIRVIEW MIDDLE SCHOOL
IB PREP MAGNET PROGRAM
REFERENCE FORM**
To be completed by core academic teacher.

Student Name _____ Teacher Name _____

School/Subject _____ Length of Time You Have Known Student _____

This student is applying for the IB Prep Magnet Program at Fairview Middle School. This is a program for exceptionally motivated and academically talented students. **This evaluation will remain confidential as part of the student's application packet** and must be received by Fairview Middle School on or before March 1st, 2016, at 4pm.

Forms can be turned in by parent with the application OR mailed to:

Fairview Middle School
Attn: Eileen Mayer, IB Prep Coordinator
3415 Zillah Street
Tallahassee, FL 32305
FAX: 850.922.6326

Please rank the student in the areas listed below on a scale of 1-5. Please circle your ranking.

	Low Below Average				High The Top Few
Academics					
The student is highly motivated to achieve.	1	2	3	4	5
The student possesses the ability to think critically.	1	2	3	4	5
The student demonstrates academic self-discipline and motivation.	1	2	3	4	5
The student is conscientious and diligent in terms of academic assignments.	1	2	3	4	5
Citizenship					
The student shows above average emotional maturity.	1	2	3	4	5
The student shows respect for staff members.	1	2	3	4	5
The student shows respect for peers.	1	2	3	4	5
The student shows a great deal of self-confidence.	1	2	3	4	5
The student responds well to setbacks and adversity.	1	2	3	4	5
The student demonstrates warmth of personality.	1	2	3	4	5

Comments _____

Teacher Signature _____ Contact E-mail or Phone Number _____ Date _____

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IB Prep Magnet Program Honor Code

By signing this document, I acknowledge that the purpose of the Fairview Middle School IB Prep Magnet Program is the preparation of students for opportunities of higher learning and that any type of academic misconduct, including cheating or disrespect towards teachers and other students, may prevent them from accomplishing this goal.

Cheating inflates grades and forces teachers to act as disciplinarians. This places unnecessary stress upon the relationship between a teacher and student. This action is unfair to students who have put the necessary time and effort into their academic responsibilities. I agree that students' who are unwilling or unable to complete the curriculum with the highest degree of integrity do not belong in the Fairview Middle School IB Prep Magnet Program. An atmosphere of trust, freedom and integrity must be maintained. In order to do this, students must live by a code of honor.

The Honor Code is not only a document signed to prevent cheating, but also a statement as to the way students will live their lives. By signing this code, I am giving my word that I will refrain from academic malpractice and report any violations of this code to a teacher or administrator.

Academic misconduct is identified as, but not limited to any activity resembling the following:

- The use of someone else's work for academic purposes; copying, plagiarizing, soliciting answers.
- Informing someone who has not taken an examination of the test questions.
- Referring to unauthorized notes during an examination.
- Showing disrespect towards students and teachers by disrupting class and preventing others from having the opportunity to learn.
- Copying any works, including parts of works, from internet or other sources, and turning them in as one's own work.

I, _____, understand that academic misconduct of any kind damages my integrity as well as the Fairview Middle School IB Prep Magnet Program. Violation of the Honor Code will necessitate interaction of the teachers/administration and may result in removal from the Magnet.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____



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FAIRVIEW MIDDLE SCHOOL
IB PREP MAGNET PROGRAM
STUDENT SHADOWING REGISTRATION
Shadowing is not required but highly recommended. Please fill out and bring this form with you on your pre-scheduled shadowing date if you decide to shadow.



Students wishing to shadow in the magnet program at Fairview Middle School find their experience very rewarding and integral to their decision to attend our program! Shadowing only occurs in the months of January and February on designated dates. Prior to shadowing, each student and their parent must complete the following steps and be aware of the following information:

- Obtain an appointment date to shadow in advance by contacting the magnet office at 488-6880 extension 122 or sign up to shadow at an IB Prep Magnet Showcase event.
- Complete this form and obtain approval signature from an administrator at your current school.
- This form should be **brought with the student on their shadowing date to Fairview and given to the IB Prep magnet shadowing coordinator.**

DATES AND TIMES: Specified dates in January and February (must pre-schedule)
9:15am – 3pm, Front Office of Fairview

PROCEDURE: Students will be paired with a current magnet student on the day of their shadowing. They will spend the entire day with them, including classes, lunch, and locker times. Students will not be assessed in any way, but are encouraged to participate in class activities. Parents are welcome to stay for a Parent Tour of the school and IB classes from 9:30am – 10am, led by the Magnet administrator.

TRANSPORTATION: Parents must provide transportation to and from Fairview for shadowing.

LUNCH: Student should bring MONEY (\$3.25) **or** BAGGED LUNCH.

MEDICATIONS: Must be left with school nurse on shadowing date

EXCUSE FORM: Student will be provided with an excuse form at the end of their shadowing experience.

Please sign, detach, and return the bottom portion of this form with the shadowing student:

Student Name _____ Current School _____

Shadowing Date (Pre-scheduled) _____ Current Grade Level: _____

Parent(s) Name _____ Contact Number _____

Parent Signature _____ Contact E-Mail _____

Please list any required medications and times of dosage. _____

Current School Administrator's Signature _____

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**FAIRVIEW MIDDLE SCHOOL
IB PREP PREPARATORY
MAGNET PROGRAM
APPLICATION PROCEDURE CHECKLIST**

All students making application to the IB Prep magnet program must complete and submit the following information on or before March 1st, 2016, at 4pm.

1. **Submit IB Prep application** to **Fairview Middle School Front Office** (3415 Zillah Street, Tallahassee, FL 32305) by March 1st, 2016, at 4pm. This should include:
 - A signed and completed **application**.
 - Copy of student's most recent **report card**.
 - Documentation of most recent **standardized test scores**.
 - Honor code** agreement signed by parent and student.
 - A graded **writing sample** (see instructions on application).
 - Teacher Recommendation Form** - unless sent or faxed directly to Fairview Middle School (via interschool mail OR fax: 850.922.6326, Attn: Eileen Mayer).
2. **Submit school choice form**. This form is required for all students making application to the IB Prep Magnet, even if you are zoned for Fairview Middle School. It must be signed by your ZONED school and your REQUESTED school (FMS). It must be submitted with application to FMS (address above) WITH ALL REQUIRED SIGNATURES. Your application is not complete unless this form has been returned with required signatures.
3. **Optional**: Interested students may schedule a shadowing date with the IB Prep Program by contacting Mrs. Eileen Mayer, IB Prep Coordinator, at 488-6880 x122 or e-mailing mayer@leonschools.net . Shadowing students must complete the shadowing registration form and bring it with them on their pre-scheduled shadowing date. Shadowing students will be provided with a written excuse note from Fairview at the conclusion of their shadowing date.

Prospective students will be notified by mail as to their acceptance or denial of admission into the program AFTER March 1st, 2016. The date of notification will be determined by the School Choice Office of Leon County.

Questions or concerns may be addressed to:

**Eileen Mayer, IB Prep Magnet Coordinator
Fairview Middle School
mayer@leonschools.net
(850) 488-6880 extension 122
Fax: (850) 922-6326**

Completed applications and school choice forms must be submitted to Fairview Middle School front office on or before March 1, 2016, 4pm.



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Leon County Schools
School Choice & Reassignment Form
Application For School Year: 2016-2017

Complete and return your new reassignment request to the School Choice Office, 725 S. Calhoun St. Ste. B1-008 (Bloxham Bldg.), Tallahassee, Florida 32301 or **fax to 487-0444**. For additional information please contact 487-7546. **PLEASE PRINT**

Student's Name _____ Birthdate _____ Sex _____

Address _____ City _____ Zip _____

Parent's Name _____ Home Phone _____ Work Phone _____

School Student Currently Attends _____ Current Grade _____

Assigned School _____ Requested School _____

Email _____ Student ID# (found on report card) _____

- Admission is based on program requirements, district-wide capacity, and when the complete application is received.
- You must have good attendance and behavior to qualify for reassignment.
- A student's reassignment may be revoked for failure to meet the school's attendance and discipline policies.
- Unless otherwise stated, transportation shall be provided by parent/guardian or on buses serving existing routes.

*****Please select one of the following options (A) School Choice or (B) Reassignment*****

A. SCHOOL CHOICE: March 1st Deadline

Turn application in to the REQUESTED SCHOOL
(School Choice form and Magnet application required)

- _____ Cobb - Applied Science & Technology
- _____ Fairview - IB Prep
- _____ Griffin - _____ Pre-AP Pre IT _____ CAPE
- _____ Raa Fine & Performing Arts
- _____ Godby - _____ Academy of Aviation _____ AVID Prg.
- _____ Godby - _____ Infor. Tech _____ Engineering
- _____ Rickards - _____ IB _____ AVID Prg. _____ Health Services

_____ Application received by school _____ Date

Turn application in to the School Choice Office

You may fax your application to 487-0444

- _____ Apalachee - Tapestry *(uniforms required)*
 - _____ Riley - Information Technology
 - _____ Sabal Palm - Technology and Robotics
 - _____ Sealey - Math & Science
 - _____ Woodville - History/Civics
 - _____ LCS Employee - Name _____
Site _____
 - _____ ESE Choice (check here if your child has an IEP)
- *ESE Choice will be based on ESE program/services and classroom capacity.***

B. REASSIGNMENT CONSIDERATION: May be submitted at any time. Please select one choice.

_____ Grandfathering _____ Over/Under Capacity _____ Construction (Contract for completion date verification)

_____ Sibling Support *(Name and birthdate of sibling attending requested school)*

Name: _____ Birthdate: _____

_____ Hardship *(Provide a written explanation and supporting documentation of the extreme economic or medical hardship for the committee to review on the second Thursday of each month.)*

*****Parents are responsible for obtaining the requested and assigned school principal's signature.**

BOTH SIGNATURES REQUIRED FOR ALL REQUESTS - Principal's signature does not signify approval of this request***

_____ Parent/Guardian Signature

_____ Date

_____ Assigned School Principal

_____ Date

_____ Requested School Principal

_____ Date

_____ Date received by SCHOOL CHOICE OFFICE

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