



**TALLAHASSEE AREA COALITION  
CENTER OF EXCELLENCE  
NATIONAL ACHIEVERS SOCIETY**

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Center Director

**TO:** Leon, Gadsden and Jefferson County School  
Principals, School and Church Coordinators

**FROM:** Dr. Malinda Jackson James, Director COE

**DATE:** April 8, 2019

**RE:** Believers Society 2019 Spring Induction

Applications are now being accepted for the Spring Induction of the Tallahassee Area Coalition Center of Excellence, Believers Society. The application is included. Criteria for induction are as follows:

“Students must be in grades one (1) through eleven (9)”

**Submitted Application Packets Must Include:**

Φ A Membership Application/Essay, Φ Report Card

(Current Report Card of 2018-19 School Year

Student must have no D's for the entire school year prior/current)

**\$35.00 Induction Fee**

(Please make check or money order payable to Leon County Schools)

**Mail Application/Check To:**

C/O: Ms. Sha'Rhonda Brown

Leon County Schools

2757 West Pensacola Street

Tallahassee, Florida 32304

The Spring Induction will be held on Thursday, May 23, 2019 at 6:30 pm; location Luxe Events – 2810 Sharer Road, Suite 28, Tallahassee, Florida. **The application deadline is Tuesday, May 7, 2019.** Completed application/fees must be mailed to: Ms. Sha'Rhonda Brown at 2757 West Pensacola Street, Tallahassee, FL 32304, by the deadline date. Thank you for your assistance in getting this information out to eligible students.

Should you have any questions, please feel free to contact me at (850) 544-0745 or [jamesm@leonschools.net](mailto:jamesm@leonschools.net).

Attachments

cc. Rocky Hanna, Superintendent, Leon County Schools  
Michele Gayle, Ph.D., Assistant Superintendent  
Alan Cox, Ph.D., Assistant Superintendent  
Sue Kraul, Director of Elementary Schools

2757 West Pensacola Street  
Tallahassee, Florida 32304

Telephone: 850-487-7185 - Fax: 850-487-7194



# CENTER OF EXCELLENCE

*Application of Participation*



- National Achievers Society   
  Academic Enrichment Center   
  Brain Bowl Competition  
 Believers Society   
  Summer Enrichment Program

Date \_\_\_\_\_

### Student Information

Social Security Number (Last 4 digits)		School ID Number	
Last Name		First Name	MI
Date of Birth		Place of Birth	
Street Address			
City		State	Zip
Telephone		Emergency Contact	
School		Current Grade	Cum. GPA
Class Enrollment: Regular <input type="checkbox"/> Gifted <input type="checkbox"/> Honors <input type="checkbox"/> AP <input type="checkbox"/> Dual Enrollment <input type="checkbox"/> Special Education <input type="checkbox"/>			
Graduation Year		Special Honors:	
Plans to attend College Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, name College _____			

**Ethnicity:** African American  White  Hispanic  Asian/P.I.  Other  **Gender:** Female  Male   
*This information is helpful, but optional.*

### Family Information *(Confidential information used for demographic purposes only.)*

Live with: Mother  Father  Both  Relative (Specify: \_\_\_\_\_) Other (Specify: \_\_\_\_\_)

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

Father's Home Phone: _____	Work Phone: _____
Mother's Home Phone: _____	Work Phone: _____

Father's Education: High School Graduate  Vocational training  College Degree  Highest grade completed: \_\_\_\_\_

Mother's Education: High School Graduate  Vocational training  College Degree  Highest grade completed: \_\_\_\_\_

Annual Household Income (check one):  \$0-\$14,999   
 \$15,000-\$24,999   
 \$25,000-\$39,999   
 \$40,000-\$49,999   
 \$50,000-above

Public Assistance Yes  No  AFDC Yes  No  Total Number in Household \_\_\_\_\_

Free/Reduced Lunch: Yes  No

### Student Scholarship Information

Have you applied for: Florida Bright Futures Scholarship Yes  No  National Achievers Scholars Award Yes  No

Scholarships Received: \_\_\_\_\_

### PARENTAL CONSENT/RELEASE FORM

The Center of Excellence Program is a partnership with you, your child, and his/her church/community center and is designed to provide participants with educational assistance that may include tutoring, mentoring, skills building, and other training. Students also participate in community service projects, workshops, and field trips that are pertinent to their educational development. By signing below, you acknowledge the goals of the Program and grant permission for your child to participate and your child agrees to participate.  
*I hereby grant the Staff of the Center of Excellence Program permission to have access to my child's educational records and demographic information and to forward same to the Florida Education Fund, Inc., its parent organization.*

Parent/Guardian Signature: _____	Date: _____
Student Signature: _____	Date: _____

Parent's Email Address: \_\_\_\_\_

T-shirt Size (Adult Sizes Only)    S                      M                      L                      XL                      2XL

# Believers Society Essay



BELIEVERS SOCIETY

To be eligible for induction into the Believers Society, a potential inductee must complete and submit a 250 word (maximum) essay on one of the topics below. The essay requirement offers a potential Believer member the opportunity to think about and communicate the principals that guide his or her life.

1. Why are good grades important?
2. What goals do I have for my life and future?
3. What does going to school mean to me?
4. What does it mean to be a Believer?