Nixon-Smiley CISD PACE Program

 PARENT / STUDENT APPLICATION

PARENT AND STUDENT MUST COMPLETE THE ENTIRE APPLICATION

The Program of Accelerated Education (PACE) exists in the Nixon-Smiley CISD to serve students who have been identified as “at risk.” At PACE, this refers to any student who, by virtue of his/her circumstances, is statistically more likely than others to not graduate from high school.

The program was developed for students who have, for a variety of reasons, failed to make progress in traditional school placements. Teachers focus on careful selection of curriculum and assist students to be better organized, demonstrate improved study habits, learn to understand the importance of dedicated effort, and become more resilient to the stress of adolescent life.

The PACE Program is a twenty-two credit, minimum competency graduation program which provides a core curriculum and a wide selection of electives available to allow students to complete the requirements for graduation in the State of Texas. The basic foundation of the program is the concept of individualized and affective learning. Certified teachers provide lessons and student assistance for students through the use of computer assisted learning as well as textbook materials. The PACE program fosters an environment that will ensure a climate of openness and respect.

PACE Goal: To increase the number of students meeting state graduation requirements who might otherwise not have the opportunity to graduate from high school.

Entry Criteria:

Recommendation from the home campus.

 PACE PROGRAM – NIXON-SMILEY CISD

 Student Enrollment Application

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

 Student ID# \_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_ Sex\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Home Phone # (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent's \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Father) (Mother)

 Father’s Cell #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother’s Cell #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father's Work #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mother’s Work # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s e-mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student lives with: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Cell #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Information:

Last grade completed? \_\_\_ # of Credits \_\_\_\_ Home Campus Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever received special services from any school? YES\_\_\_ NO \_\_\_

If yes, what services did you receive? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Personal Information

 Marital Status: Single \_\_\_\_ Married \_\_\_\_

Are you currently pregnant? YES\_\_\_ NO \_\_\_ If yes, what is your due date? \_\_\_ / \_\_\_ / \_\_\_\_

Do you have any children? YES\_\_\_ NO \_\_\_ What ages are the children? \_\_\_\_\_\_\_\_\_\_\_\_\_

Will you need to use the services of the child care center at NSCISD? YES\_\_\_ NO \_\_\_

Do you presently have a job? YES\_\_\_ NO \_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How many hours do you work per week? \_\_\_\_\_

Transportation is provided to / from Alternative Center. Nixon-Smiley CISD vehicles will transport PACE / DAEP students to / from the DAEP. Do you need transportation services? YES \_\_\_ NO \_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT SIGNATURE / DATE PARENT SIGNATURE / DATE

STUDENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain your current educational needs. How do you believe that PACE will be able to meet these needs? (STUDENT RESPONSE) You may attach an additional page if needed. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain your dedication to your success. What commitment(s) will you make in order to be successful at PACE? Explain any circumstances that the PACE staff should be aware of in order to assist in your success. (STUDENT RESPONSE)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As the parent / guardian of this student, please explain the purpose and the need for your student to enroll in PACE. Why you think he/she will be successful in this program and what will you do to support your student’s success at PACE? (PARENT / GUARDIAN RESPONSE)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain any circumstances that the PACE staff should be aware of in order to better assist in your student’s success at PACE. (PARENT / GUARDIAN RESPONSE)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT / GUARDIAN SIGNATURE / DATE STUDENT SIGNATURE / DATE

 Nixon-Smiley CISD – PACE Program

 Parent Commitment / Contract

Student/Parent Initials

\_\_\_\_ \_\_\_\_ I understand PACE is a program of choice and all students must apply for enrollment. I would like for my student to be enrolled in this program. I will cooperate with PACE Staff to ensure my student’s success.

Successful Attendance

 \_\_\_\_ \_\_\_\_ I understand my student must attend school in order to learn. I am responsible for my student attending school a minimum of 90% of the total days per semester. My student must arrive each day no later than 8:30 AM. Students may not sign out before 12:30 PM. I will commit to make appointments outside of school hours.

 \_\_\_\_ \_\_\_\_ I understand if my student is absent or tardy, I must contact the PACE office to let them know of the absence or late arrival. 830-582-1536.

 \_\_\_\_ \_\_\_\_ I understand my student’s records remain at the home campus and information concerning senior pictures, prom, ordering caps and gowns and graduation can be found by visiting the home campus website or by contacting the home campus assistant principal/counselor’s office.

Successful Academics

 \_\_\_\_ \_\_\_\_ I understand PACE is a program which focuses on graduation. I will support my student in all academic areas and, should they fall behind the minimum module completion goal of one (1) module per week, I will encourage them to complete homework in order to get caught up.

 \_\_\_\_ \_\_\_\_ I understand I may contact my student’s advisor to check on my student’s progress at any time. PACE teacher’s contact information is included in your information packet as well as in the PACE handbook.

 \_\_\_\_ \_\_\_\_ I understand, in order to receive a high school diploma, my student must pass the state mandated STARR EOC exams and I will support the teachers in their efforts to prepare my student for such testing.

Successful Student Conduct

 \_\_\_\_ \_\_\_\_ I understand my student must be familiar with the contents of the PACE Student Handbook and will be expected to abide by all policies and procedures. If my student violates any school policy, I will support the teachers and administration in their disciplinary efforts.

 \_\_\_\_ \_\_\_\_ I understand my student must comply with the dress code (outlined in the handbook). If my student arrives to school out-of-dress code, I will support the administration in their disciplinary efforts.

 \_\_\_\_ \_\_\_\_ I understand my student may drive to and from PACE only after permission and providing a valid driver’s license and a proof of insurance with students name. I also understand that my student must ONLY park in the area designated by the school and he/she must drive in a safe and lawful manner anywhere within the school zone.

\_\_\_\_ \_\_\_\_ I have received a copy of the PACE Parent/Student Handbook and I understand that failure to comply with the policies and procedures outlined in the handbook may result in removal from the program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent / Guardian Signature Date