

Engaging Minds. Empowering Futures.

## **Application Process**

- Applications are available beginning November 28, 2016.
- Applications are due to your school counselor by 12 noon on December 16, 2016 or must be
  postmarked by December 16, 2016. If you choose to mail your application, please send it to:
  Wilson Academy of Applied Technology, 4510 Old Stantonsburg Road, Wilson, NC 27893.
- Applications must be hand-written in black or blue ink. Please print legibly.
- The following items are needed with your completed application. Your school counselor can assist you in retrieving these items.
  - Report Cards for 7th and 8th grades
  - o EOG/EOC scores for 7th grade
  - Discipline Report for 8<sup>th</sup> grade
  - o Attendance Record for 8th grade
- You must also have two out of your four core teachers (Math, English, Science, or Social Studies) complete recommendation letters.
- Incomplete applications will not be reviewed by the Admissions Team.

#### Note:

- Students selected for interviews will be notified by letter no later than 48 hours before their interview day.
- Interviews will be held January 2-11, 2017.
- Students will be notified of acceptance to Wilson Academy of Applied Technology by January 23, 2017.
- Signed contracts need to be submitted by January 31, 2017. Signed contracts can be given to your school counselor or sent to Wilson Academy of Applied Technology, using the address above. If you receive acceptance letters from both Wilson Academy of Applied Technology and Wilson Early College Academy, you can only sign and return one contract.
- Accepted students are required to attend "Commitment Night" on May 4, 2017. The ceremony
  will be held in the Beddingfield High School Auditorium at 6:00 p.m. Students will need to
  arrive by 5:15 p.m. Wilson Academy of Applied Technology will be open to guests after the
  ceremony.





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# **Application for Admission**

Print in blue or black ink.

#### **Student Information**

| Current Middle School:         | nce Zone:                               |                       |
|--------------------------------|---|-----------------------|
| Student Name:(First)           | (Middle)                                | (Last)                |
| Preferred Name:                | ,                                       | ,                     |
|                                |   |                       |
| Ethnic/Race:                   | _                                       |                       |
|                                | Family Information                      |                       |
| Place a check in the box besid | le the name of the parent(s)/guardia    | n(s) whom you reside. |
| Parent/Guardian Name:          |   |                       |
| E-mail Address:                |   |                       |
| Home Phone ( )                 | Cell Phone (                            | )                     |
| Parent/Guardian Name:          |   |                       |
| E-mail Address:                |   |                       |
| Home Phone ( )                 |   |                       |
| Physical Address:              |   |                       |
|                                | (Street)                                |                       |
| (City)                         | (State)                                 | (Zip Code)            |
| My physical                    | l address is the same as my mailing add | ress.                 |
| Mailing Address:               | (Street)                                |                       |
| (City)                         | (State)                                 | (Zip Code)            |

| 1.   | Mother's                      | First & Las   | t Name:                                 |                      |                                |                      |                    |                     |  |  |
|--|-------------------------------|---|---|----------------------|--------------------------------|----------------------|--------------------|---------------------|--|--|
| 2.   | . Father's First & Last Name: |   |   |                      |                                |                      |                    |                     |  |  |
| 3.   | Guardian                      | Guardian's First & Last Name: Relationship:               |   |                      |                                |                      |                    |                     |  |  |
| 4. Parent/Guardian Education Level – Place an X in the box that best describe each parent/g educational level completed. |                               |   |   |                      |                                |                      |                    |                     |  |  |
|  |                               | Didn't<br>complete<br>High<br>School                      | High<br>School<br>Diploma               | GED/Adult<br>Diploma | Community<br>College<br>Degree | Bachelor's<br>Degree | Master's<br>Degree | Doctorate<br>Degree |  |  |
| Ī  | Mother                        |   |   |                      |                                |                      |                    |                     |  |  |
| Ī  | Father                        |   |   |                      |                                |                      |                    |                     |  |  |
| Ī  | Guardian                      |   |   |                      |                                |                      |                    |                     |  |  |
| Ī  | Guardian                      |   |   |                      |                                |                      |                    |                     |  |  |
|  |                               | c. Position Vork (Father a. Name of b. Phone: c. Position | n:er/Guardia<br>of Business<br>()<br>n: | n):<br>:             | Academy of A                   | _                    |                    |                     |  |  |
|  |                               |   |   |                      |                                |                      |                    |                     |  |  |
| 8. List the names of the people living in your household an <b>Person</b>  |                               |   |   |                      | nd their rela  Relations       | -                    | you.               |                     |  |  |
| 1.   |                               |   |   |                      |                                |                      |                    |                     |  |  |
|  |                               |   |   |                      |                                |                      |                    |                     |  |  |
| 3.   |                               |   |   |                      |                                |                      |                    |                     |  |  |
| 4.   |                               |   |   |                      |                                |                      |                    |                     |  |  |
| _  |                               |   |   |                      |                                |                      |                    |                     |  |  |

### **Student Profile**

| 1. | Special Program          | s: (Check all prog  | grams that app  | ply to you.) |               |                        |             |
|----|--------------------------|---------------------|-----------------|--------------|---------------|------------------------|-------------|
| _  | 504 Program              |                     |                 | A            | cademically   | and Intellectually G   | ifted (AIG) |
| _  | English as a S           | Second Language     | (ESL)           | S            | TEM/Roboti    | cs Class (Forest Hills | Only)       |
| _  | Advancemen               | t Via Individual    |                 | N            | lakerSpace, l | Manufacturing, or S    | ΓΕΜ Club    |
|    | Determination            | n (AVID)            |                 | C            | ther          |                        |             |
| -  | Exceptional C            | Children's Progran  | n (EC)          |              |               |                        |             |
| 2. | Lunch Status:            | Free/Re             | duced           | I            | No Lunch A    | ssistance              |             |
| 3. | Have you ever fa         | ailed a grade lev   | el? If so, plea | ase list the | grade(s) he   | e                      | _           |
| 4. | Will you need tr         | ansportation to     | Wilson Acad     | emy of Ap    | plied Techr   | nology?                |             |
|    | Morning:                 | Yes N               | Io After        | rnoon:       | Yes           | No                     |             |
| 5. | List any commu           | nity service activ  | vities you hav  | ve been inv  | volved in th  | is year.               |             |
|    | 1                        |                     |                 |              |               |                        |             |
|    | 2                        |                     |                 |              |               |                        |             |
|    | 3                        |                     |                 |              |               |                        |             |
| 6. | List any extracu         | rricular activities | s/athletics yo  | ou have be   | en involved   | in this year.          |             |
|    | 1                        |                     |                 |              |               |                        |             |
|    | 2                        |                     |                 |              |               |                        |             |
|    | 3                        |                     |                 |              |               |                        |             |
| 7. | T-Shirt Size: <i>Cir</i> | cle the appropri    | ate size. (Ad   | ult Sizes)   |               |                        |             |
|    | Small                    | Medium              | Large           | XL           | XXL           | XXXL                   |             |



### **Student Responses**

The students at Wilson Academy of Applied Technology are individuals that possess the maturity and independence to accept the challenges of this progressive school, to achieve honors level work, and to participate in college classes while in high school.

The following essays will be used in determining acceptance to WAAT Early College. Please respond thoughtfully. Use the reverse side for additional comments or space. Answers must be handwritten.

| Explain why you are interested in attending WAAT Early College.  |
|--|
|  |
|  |
|  |
|  |
| Have you ever been suspended from school? If yes, please explain.  |
|  |
|  |
|  |
|  |
| WAAT Early College offers a rigorous academic curriculum that will require you to demonstrate a high level of commitment, maturity, responsibility, and organization. Please give specific examples that show you possess the ability to carry out these requirements. |
|  |
|  |
|  |
|  |

| By signing below, I acknowledge that all information is accurate and comprecognize that acceptance to Wilson Academy of Applied Technology (WA commitment. I understand that WAAT Early College operates on both a his students are expected to be responsible members of the community. Any a problems will be sufficient cause to rescind any assignment to WAAT Earleffort and time my parents and I will be undertaking if accepted to WAAT agreeing to stay the entire program. If, at the end of any high school year, I WAAT Early College, I may be reassigned to my base high school. | AAT) Early College requires a five-year gh school and college campus and that ttendance, behavior, or serious academic y College. I understand the commitment of Early College. This commitment includes |
|--|--|
| By signing below, my parent/guardian and I are certifying that the inform all these terms for attending WAAT Early College. I understand that inacce acceptance or dismissal from the school.  |  |
| Name of Parent/Guardian (Please Print):  |  |
| Parent/Guardian Signature:   |  |
|  |  |
| Student Name: (Please Print):  |  |
| Student Signature:   | Date:  |
|  |  |



# Wilson Academy of Applied Technology Teacher Recommendation Form

Student Name: \_\_\_\_\_ PowerSchool # \_\_\_\_\_

| <b>Student:</b> This form must be completed by one of your four core with your application. You must include two completed recomm  |   |  |   |  |  | included                    |
|--|---|--|---|--|--|-----------------------------|
| <b>Teacher:</b> The student named above is applying for admission to School. WAAT Early College students will take a rigorous and a at WAAT Early College in preparation for post-secondary educa student's counselor in a sealed envelope with your name written application deadline is noon on December 16, 2016. Please comp | ccelerated ration or the across the elete this in a | nix of high s<br>workforce. I<br>back flap of<br>a timely ma | school and coll<br>Please complet<br>f the envelope a<br>nner for the stu | ege classes on this form a feet of the fee | during their to<br>and return it<br>been sealed.<br>I above. | five years<br>to the<br>The |
| We rely heavily on your recommendation. Place check marks in<br>had no opportunity to observe these behaviors, place a check in  |   |  |   | iation of thi  | s student. If y  | ou nave                     |
| Characteristics  | Excellent<br>(All the<br>Time)                      | Above<br>Average<br>(Most of<br>the Time)                    | Average<br>(Sometimes)  | Below<br>Average<br>(Almost<br>Never)  | Not<br>Observed  |                             |
| Knowledge of Basic Content Skills  |   | ,  |   | ,  |  | -                           |
| Problem Solving/Reasoning Ability  |   |  |   |  |  |                             |
| Effort   |   |  |   |  |  |                             |
| Willingness to Accept Challenges   |   |  |   |  |  | -                           |
| Command of Content Compared to Classmates  |   |  |   |  |  |                             |
| Interpersonal Relations: Ability to Get Along with Others  |   |  |   |  |  |                             |
| Maturity: Self-Direction, Confidence   |   |  |   |  |  | -                           |
| Perseverance: Stamina, Endurance, Ambition   |   |  |   |  |  | -                           |
| Reliability: Dependability, Sense of Responsibility  |   |  |   |  |  |                             |
| Communication Skills: Verbal Skills, Clarity of Expression   |   |  |   |  |  | _                           |
| Behavior   |   |  |   |  |  | -                           |
| Interest in Advanced Manufacturing Careers   |   |  |   |  |  |                             |
| Have absences affected the student's classroom performant If yes, please explain.  | nce? Circl  | e – YES  | NO  |  |  | 1                           |
| Based on your experience with the applicant, what is your  | r recomme   | ndation to   | WAAT Early  | College?   |  |                             |
| ☐ Highly Recommend ☐ Recommend [   | Do N  | lot Reco   | mmend   |  |  |                             |
| Name (Please Print):   | Cou   | rse Title: _   |   |  |  |                             |
| Signature:   | ignature: Date:                                     |  |   |  |  |                             |

Please use the reverse side of this form to provide additional information or comments about this student, if necessary.





### Wilson Academy of Applied Technology Teacher Recommendation Form

| Student Name: PowerSchool #   |   |   |   |  |  |    |
|---|---|---|---|--|--|----|
| <b>Student:</b> This form must be completed by one of your four conwith your application. You must include two completed recom  |   |   |   |  |  | ed |
| <b>Teacher:</b> The student named above is applying for admission to School. WAAT Early College students will take a rigorous and at WAAT Early College in preparation for post-secondary educated student's counselor in a sealed envelope with your name written application deadline is noon on December 16, 2016. Please compared to the student of the student of the second student o | accelerated r<br>cation or the<br>en across the | nix of high s<br>workforce. I<br>back flap of | school and coll<br>Please complet<br>the envelope a | ege classes on<br>this form a<br>after it have | during their five ye<br>and return it to the<br>been sealed. The |    |
| We rely heavily on your recommendation. Place check marks i had no opportunity to observe these behaviors, place a check in   |   |   |   | ation of this                                  | s student. If you ha   | ve |
| Characteristics   | Excellent<br>(All the<br>Time)                  | Above<br>Average<br>(Most of<br>the Time)     | Average<br>(Sometimes)                              | Below<br>Average<br>(Almost<br>Never)          | Not<br>Observed  |    |
| Knowledge of Basic Content Skills   |   |   |   | 2 (0 / 02)                                     |  |    |
| Problem Solving/Reasoning Ability   |   |   |   |  |  |    |
| Effort  |   |   |   |  |  |    |
| Willingness to Accept Challenges  |   |   |   |  |  |    |
| Command of Content Compared to Classmates   |   |   |   |  |  |    |
| Interpersonal Relations: Ability to Get Along with Others   |   |   |   |  |  |    |
| Maturity: Self-Direction, Confidence  |   |   |   |  |  |    |
| Perseverance: Stamina, Endurance, Ambition  |   |   |   |  |  |    |
| Reliability: Dependability, Sense of Responsibility   |   |   |   |  |  |    |
| Communication Skills: Verbal Skills, Clarity of Expression  |   |   |   |  |  |    |
| Behavior  |   |   |   |  |  |    |
| Interest in Advanced Manufacturing Careers  |   |   |   |  |  |    |
| Have absences affected the student's classroom performations, please explain.   |   |   | NO  |  |  |    |
| Based on your experience with the applicant, what is you  Highly Recommend  Recommend   |   | ndation to<br>I <b>ot Reco</b> i              | ·   | College?                                       |  |    |
| Name (Please Print):  | Con   | rse Title:                                    |   |  |  |    |
| Signature:  |   |   |   |  |  |    |
| ~-0   |   |   |   |  |  |    |

Please use the reverse side of this form to provide additional information or comments about this student, if necessary.