



SOUTH PALM GARDENS HIGH SCHOOL

"Where students enter to learn and leave to achieve"

3907 Camino Real Viejo, Westlaco, Texas 78596

Phone: (956) 969-6621

Fax: (956) 565-5994



Principal
Mrs. Tina Wells

Counselor
Mrs. Cecilia Becerra

Social Worker
Mr. Ernesto Alcazar

Dear Applicant:

Welcome to South Palm Gardens High School. Our goal is to provide you a positive learning environment that will prepare you to become self-directed, lifelong learners ready to achieve personal success in today's 21st century world.

Please complete the attached application and be sure to include all information requested in the application. **Please make sure your counselor has completed the referral form on the last page of this packet and that all transcripts and test scores are attached.**

South Palm Gardens High School offers an environment that is different from the current high school structure.

To be considered for enrollment, we consider the following factors:

- Motivation
- Commitment to attend our program daily
- Ability to work at an accelerated pace
- Attend classes each day including EOC preparation classes
- Have earned 6 or more credits
- Be a minimum of two years behind your graduation track
- Students attempting at least their third year of high school
- At-Risk and in need of Credit Recovery
- Students in need of early graduation for one reason or another (To be decided by principal, parent and student)

Our staff is dedicated to you and will help guide you every step of the way to ensure your success. You will enter South Palm Gardens High School to learn and leave to achieve. We are here to help you, but you must fully commit to the program. This is a wonderful opportunity for you so take full advantage of it.

Sincerely,
Mrs. T. Wells

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Student STATEMENT OF NEED

Why do you feel that South Palm Gardens is the right school for you?

Student Oath:

I understand that SPGHS is by a selection process only and intended for students who are “At Risk” of dropping out of school. I understand that I should not apply unless I have a strong desire to complete requirements for graduation. I understand that if I am not able to pass all TAKS/EOC tests, I will not receive a high school diploma. It is my choice to be considered for this program, and if accepted, I will be a responsible student and maintain excellent attendance, punctuality and production of work. As such, if selected, I understand that I am expected to adhere to the rules and expectations as set forth by SPGHS. I understand that students not fulfilling expectations may be subject to removal from the program and must return to their home campus.

Student Signature

Parent Witness

Date

Parent / Guardian STATEMENT OF NEED

Declaración de necesidad por parte de padre

- Why do you want your son or daughter to attend SPGHS?

En breves palabras. Diga la razón porque quiere que su hijo o hija asista a esta escuela.

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Has student ever been referred or placed in a discipline alternative setting (Guidance Center at Horton, JJAEP, or Boot Camp.)? _____

Date of placement (s): _____

If yes, why were you sent?

How do you get to school each day? _____

If you ride the bus, what bus do you normally ride to your current high school? _____

Who told you about South Palms Gardens High School? _____

Do you know any students that currently attend S.P.G.H.S.? _____

List 2 references not related to you:

1. Name _____

Address _____

Telephone _____

2. Name _____

Address _____

Telephone _____

Note: Upon completion of all sections of this application, please submit to SPGHS Counselor. Your application will be reviewed and you will be contacted by phone to discuss an interview date. You may also be given the reason that you may not be a good candidate at this time, but possibly at a later date due to enrollment numbers or other factors such as cohort year, age, credits, testing, etc.

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Date of Referral: _____

Student Name: _____

ID#: _____

Date of Birth: _____

Please circle cohort year: 2015 2016 2017 2018

Former Campus: Weslaco High School Weslaco East High School Other: _____

Parent Consent (for students under 18)

Signature

Date

Consent Form (Counselor at former campus): STUDENT MEETS ALL CRITERIA

- Attach current transcript
- Attach TAKS/EOC profile/CSR
- At-Risk
- 504

- Migrant
- Special Ed.
- GT
- LEP/ESL

Signature

Date

SLC Administrator/Principal Approval:

Signature

Date

Data Entry Clerk:

Signature

Date

SPGHS Administrator (Enroll student if cleared):

Signature

Date

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